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

NJ Cohort 6 Collaborative Learning Session #2

February 25th 2026

Learning Session Agenda

Introductions

TeamBirth Core Knowledge & Skills
- Learn: Shared Planning Tool - PREFERENCES & PLAN

TeamBirth Implementation
- Implementation Roadmap & Timeline
- Current core activities:
  - DEVELOP YOUR STRATEGY
  - CUSTOMIZE TEAMBIRTH
  - ASSESS YOUR CONTEXT

Looking Ahead
- Takeaways From Today
- Action Items

NJ TeamBirth Websites

Access the **private** NJ Cohort Resource Page

www.njhcqi.org/teambirthnjcohorts

Password: NJcohorts2022!

Public TeamBirth NJ website

https://www.njhcqi.org/shared-decision-making

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

SHARED PLANNING BOARD

TEAM   PLAN
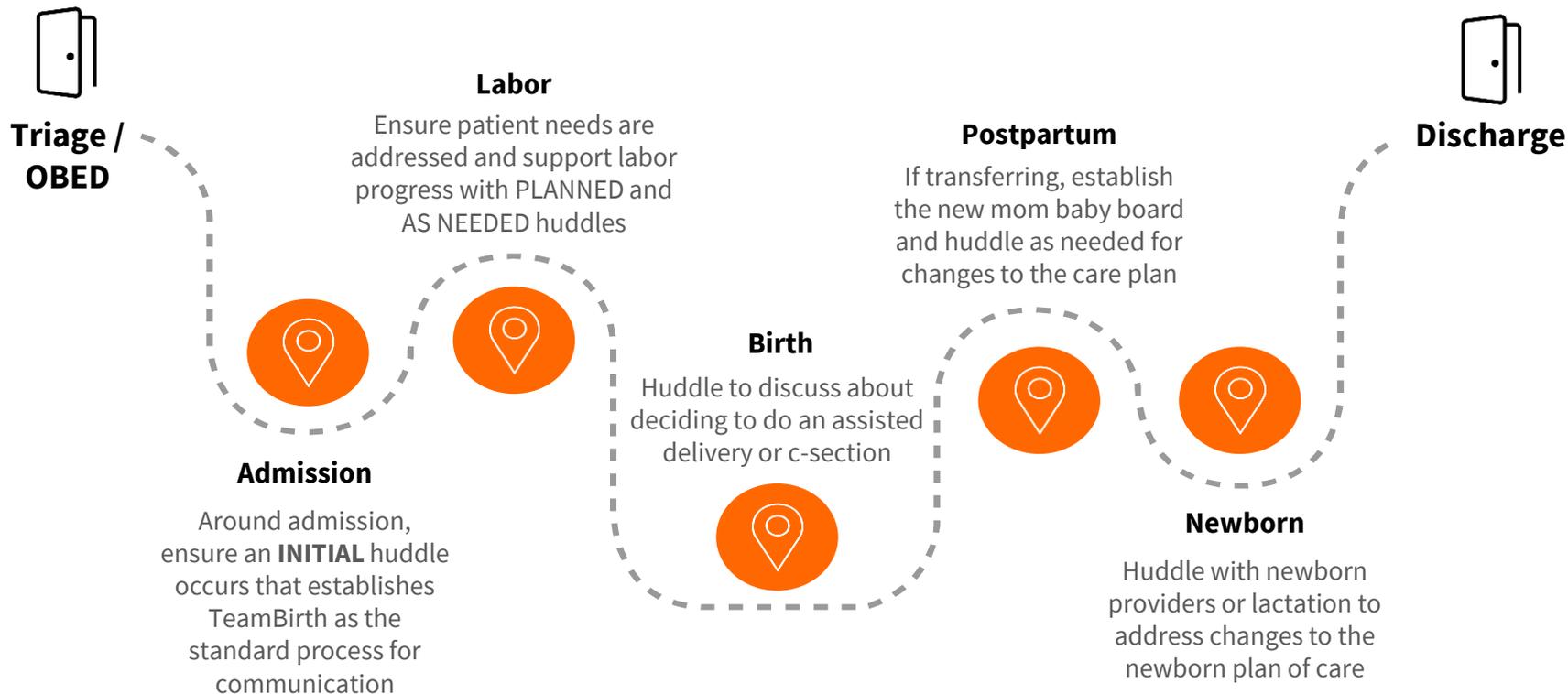
PREFERENCES   NEXT HUDDLE

2.
SHARED PLANNING TOOL

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

WHEN TO HUDDLE: Door to Door TeamBirth

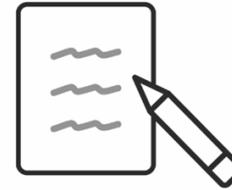There are **key moments** throughout each journey when it is essential to use TeamBirth.

Triage / OBED

Labor
Ensure patient needs are addressed and support labor progress with PLANNED and AS NEEDED huddles

Postpartum
If transferring, establish the new mom baby board and huddle as needed for changes to the care plan

Discharge

Admission
Around admission, ensure an **INITIAL** huddle occurs that establishes TeamBirth as the standard process for communication

Birth
Huddle to discuss about deciding to do an assisted delivery or c-section

Newborn
Huddle with newborn providers or lactation to address changes to the newborn plan of care

Shared Planning Tool

TEAM

PLAN

Me

Baby

Progress

PREFERENCES

NEXT HUDDLE

Shared Planning Tool
Version April 2024

TEAM

KEY BEHAVIOR: Promote the role of each team member

Shared Planning Tool

TEAM

PLAN
Me
Baby
Progress

PREFERENCES

NEXT HUDDLE

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)
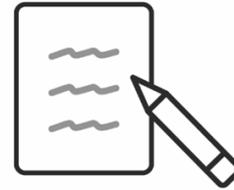
Shared Planning Tool

TEAM

PLAN

Me

Baby

Progress

PREFERENCES

NEXT HUDDLE

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)

Eliciting Preferences

Talking through preferences is a key component to providing safe, dignified care.

Open-ended questions asked during a huddle, elicit preferences

These **questions** can help clinicians:

- Identify what gives the patient a sense of safety and comfort
- Gauge how the plan is being understood by everyone on the care team

The **answers** can help clinicians identify opportunities to:

- Provide education
- Adjust expectations
- Minimize conflict or confusion

Eliciting Preferences

What are some examples of open-ended questions that can elicit preferences?

❖ What are you concerned or worried about right now?

❖ What are your hopes or wishes right now?

❖ What is bothering you or frustrating you right now?

❖ What is comforting you or reassuring you right now?

Equitable Care

The concept facilitated via the PREFERENCES section and key behavior

Birth equity refers to the principle and goal of ensuring that every individual, regardless of their background or circumstances, has access to safe, respectful, and high-quality maternity care throughout the childbirth process

It emphasizes **addressing and eliminating disparities, inequities, and systemic barriers** that contribute to unequal birth outcomes and experiences among different populations.

Inequality
Unequal access to opportunities

Equality?
Evenly distributed tools & resources

Equity
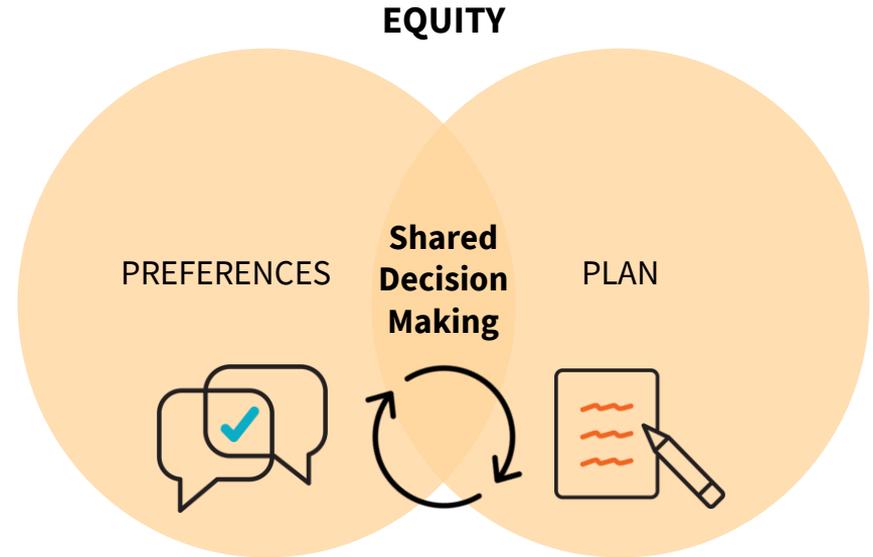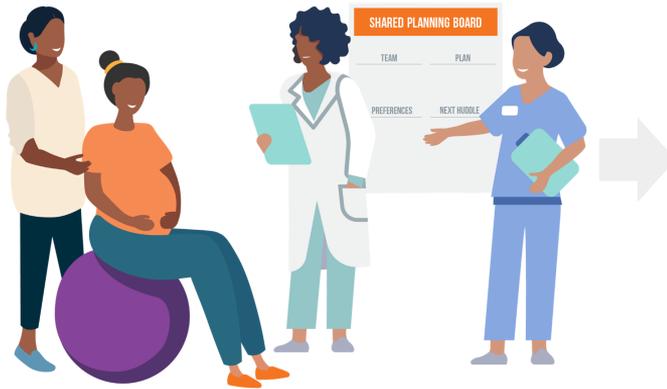Custom tools that identify & address inequality
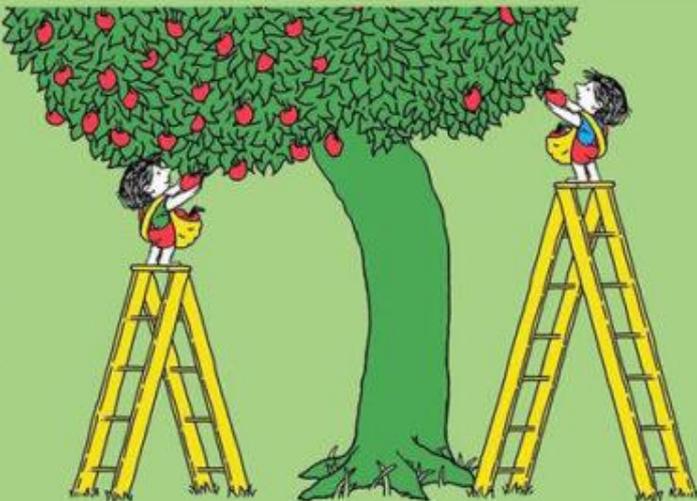
Justice
Fixing the system to offer equal access to both tools & opportunities
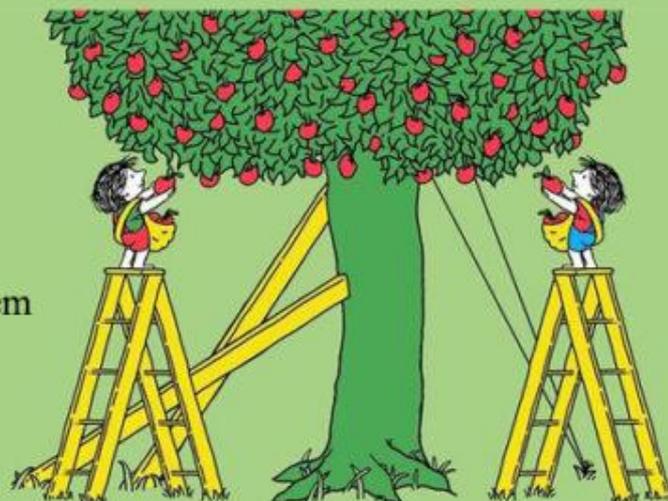
Equitable Care

Starting with TeamBirth's Core, the connection between the PREFERENCES and PLANS leads to equitable care via shared decision making
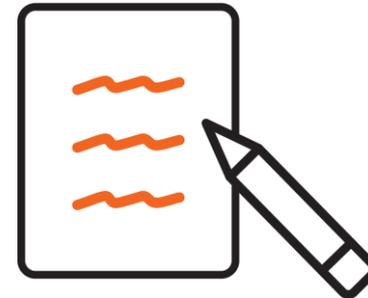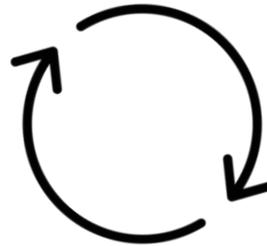
CONNECTION: **PREFERENCES** AND **PLANS**

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
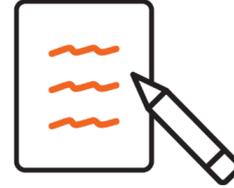
Shared Planning Tool

TEAM

PLAN

Me

Baby

Progress

PREFERENCES

NEXT HUDDLE

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

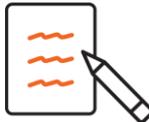- Can be updated more frequently as needed by the nurse
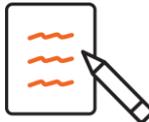
Shared decision-making

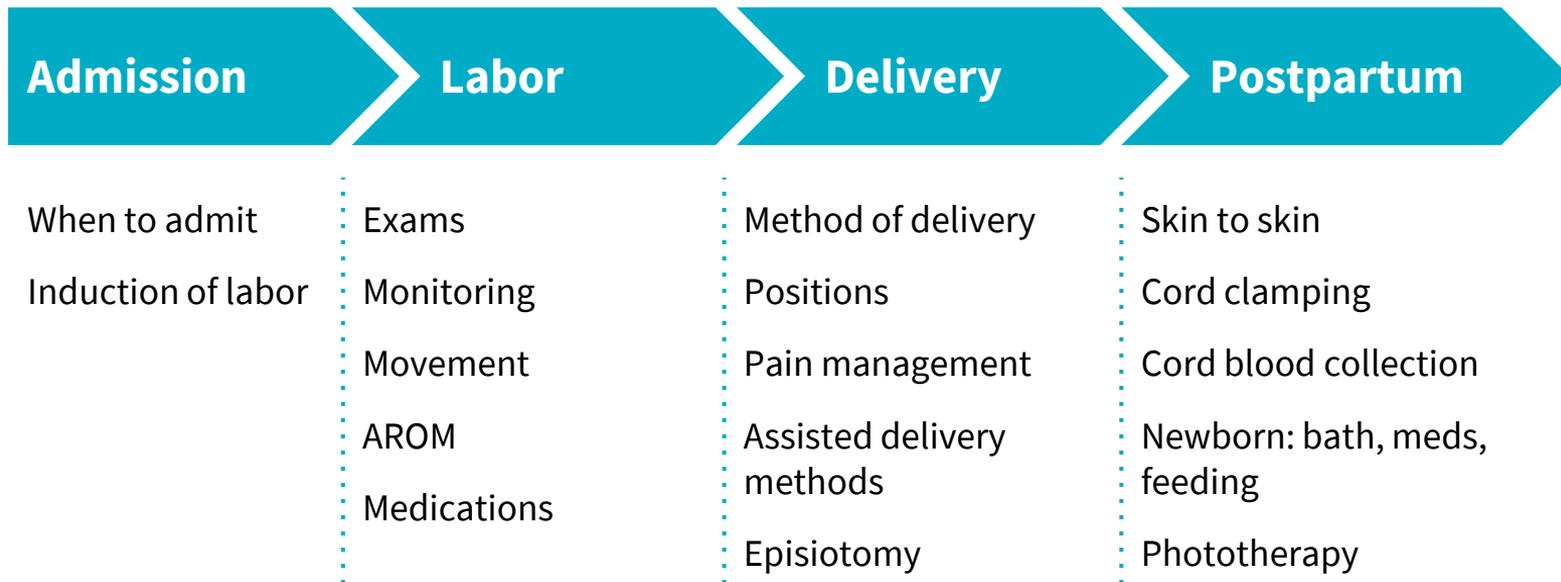The concept facilitated via the PLAN section and key behavior

An approach where:

- Clinicians and patients discuss the best available evidence when faced with making decision about their care

- Patients are supported to share their preferences and to consider their options in order to make an informed decision about next steps

Shared Decision-Making Opportunities

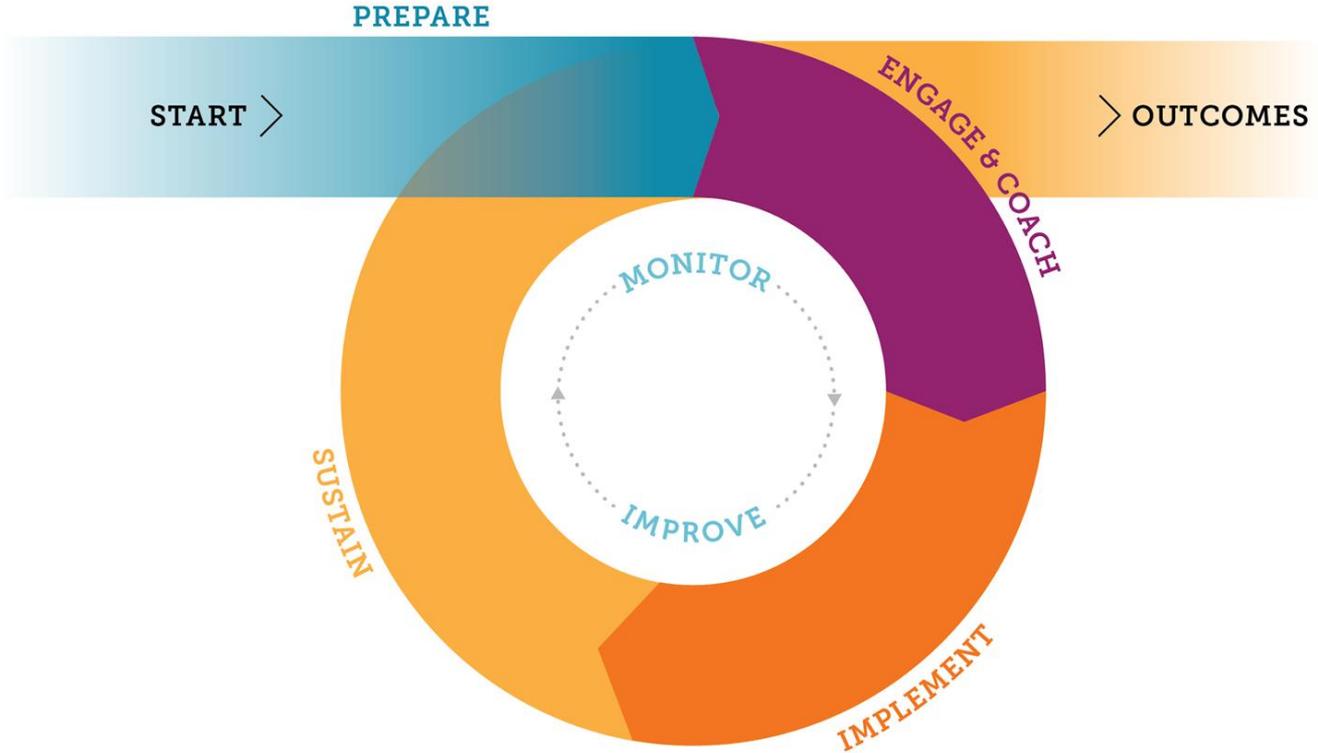Examples of moments when shared decision-making is used

Admission	Labor	Delivery	Postpartum
When to admit	Exams	Method of delivery	Skin to skin
Induction of labor	Monitoring	Positions	Cord clamping
	Movement	Pain management	Cord blood collection
	AROM	Assisted delivery methods	Newborn: bath, meds, feeding
	Medications	Episiotomy	Phototherapy

TeamBirth Implementation

TeamBirth Implementation Pathway

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

TeamBirth Implementation Roadmap

Today's focus

PHASE	PREPARE	ENGAGE & COACH	IMPLEMENT	SUSTAIN
CORE MILESTONES	❏ Project Kick Off	❏ Boards Installed	❏ TeamBirth Go Live	❏ Showcase Results
CORE ACTIVITIES	✓ Build your team ✓ **Develop your strategy** ✓ **Assess your context** ✓ **Customize TeamBirth**	✓ Socialize culture change ✓ Provide training ✓ Practice huddles ✓ Conduct patient surveys	✓ Monitor progress ✓ Celebrate wins ✓ Collect huddle & experience data ✓ Iterate & improve	✓ Onboarding & continuing education ✓ Systematic quality improvement ✓ Evaluate impact ✓ Identify areas for expansion

Core Implementation Activity:
DEVELOP YOUR STRATEGY

DEVELOP YOUR STRATEGY

Use the [HOW TO worksheets](#) to get started on your strategy

HOW TO | Develop Your Implementation Strategy

HOW TO | Develop Your Measurement Strategy

HOW TO | Develop Your Communication Strategy

Core Implementation Activity:
ADAPT TEAMBIRTH

ADAPT TEAMBIRTH

CORE: Co-design your site's unique TeamBirth process and shared planning tool

OBJECTIVES

Design your unique shared planning tool design

Test, iterate, and finalize your design based on feedback from care team members

Determine when to huddle based on how your units work

Milestones:
- ❏ Board design finalized
- ❏ Boards ordered
- ❏ Boards installed

ADAPT

Who you involve in your design process

Your methods for co-design and small-scale testing

Your ording and installation process

Adapting TeamBirth

We will offer guidance, recommendations, and examples for how each TeamBirth component and activity can be adapted

Core

Must be done

Add-on
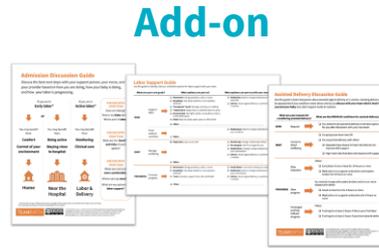
Recommended yet optional

Implementation
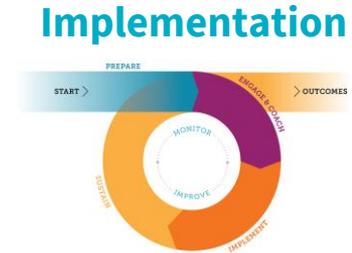
Activities we focus on together

All should be adapted to fit your unique context needs

Examples of opportunities for adaptation

Core	Add-on	Implementation

Core
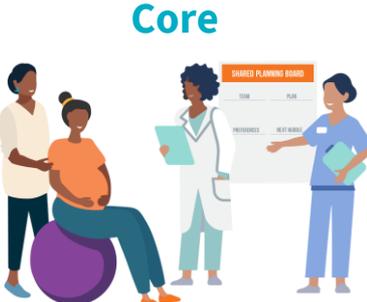
Visual tool

Verbalizing the Huddle

Having an initial Huddle

White board or printed inserts

Naming "Huddles" something different

Huddle in triage or when deciding to admit

Add-on
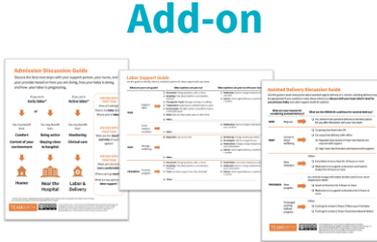
Simple 1-pager

Differentiated Plan structure

Shared with patient

Include branding

Using "birthing person" instead of "Me"

Shared as printed paper or digital copy

Implementation
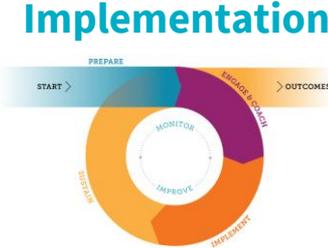
Build your team

Collect experience data

Provide training

Different #s and roles on the team

Gather experiences via surveys, conversations, or other methods

Train in-person, via videos, or e-learning modules

Adapting TeamBirth

Review the **TeamBirth Components** resource for guidance on adapting the Core and Add-on Components of TeamBirth to your unique context

go.ariadnelabs.org/TBcomponents

Design your tool

Shared Planning Tool

TEAM	PLAN
	Me
	Baby
	Progress
PREFERENCES	NEXT HUDDLE

Examples

Welcome to Saint Peter's University Hospital

Thank you for choosing **SAINT PETER'S UNIVERSITY HOSPITAL** A MEMBER OF SAINT PETER'S HEALTHCARE SYSTEM

Allergies: | **Date:** | **Room:** | **Food #:**

Meet Your Care Team
Name:
Support People:
Doula:
Nurse:
Provider:

We are having a...
Boy   Girl
Surprise

Care Plan
For Me

For Baby

For My Labor Progress

Next TeamBirth Pause

Preferences, Hopes, Desires

1   2   3   4   5   6   7   8   9   10
Not Coping   Struggling   Coping   Coping Well   Coping Very Well

2cm   3cm   4cm   5cm   6cm   7cm   8cm   9cm   10cm

Early Labor   **Active Labor**   **Pushing**

Welcome to Saint Peter's University Hospital

SAINT PETER'S UNIVERSITY HOSPITAL
A MEMBER OF SAINT PETER'S HEALTHCARE SYSTEM

Allergies: 📅 **Date:**   🛏 **Room:**   🍎 **Food #:**

Meet Your Care Team

Name:

Support People:

Doula:

Nurse:

Provider:

We are having a...

👣 **Boy**   👣 **Girl**

🎁

Surprise

Care Plan

For Me

For Baby

For My Labor Progress

Next TeamBirth Pause

Preferences, Hopes, Desires

1	2	3	4	5	6	7	8	9	10
Not Coping		Struggling		Coping		Coping Well		Coping Very Well	

1cm 2cm 3cm 4cm 5cm 6cm 7cm 8cm 9cm 10cm

Early Labor   **Active Labor**   **Pushing**

Examples

Penn Medicine
Princeton Medical Center
Welcome to Labor & Delivery

| Date: / / | Room # : | Dining On Call: 13663 | Housekeeping: 19400 |

Care Team:

Me: Baby:

Support Person: Neonatologist:

Nurse: Pediatrician:

Hospitalist / OB:

Midwife:

Others:

Birth Preferences:

Pain Management:

Care Plans:

Me:

Baby: We're having a _____

Labor Progress:

Next Huddle:

DILATION CHART

1cm 2cm 3cm 4cm 5cm 6cm 7cm 8cm 9cm 10cm

![Penn Medicine - Princeton Medical Center]
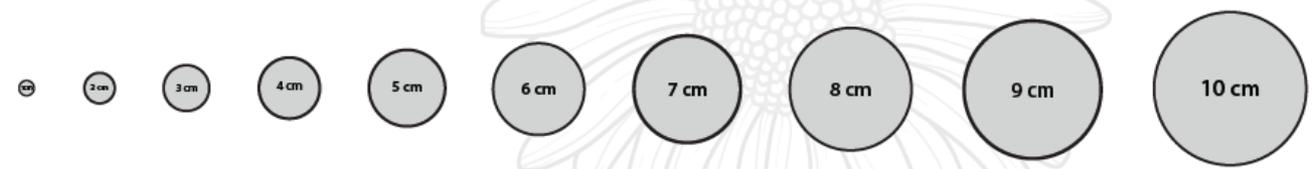
Welcome to Labor & Delivery

Date: / /	Room # :	Dining On Call: 13663	Housekeeping: 19400

Care Team:

Me: **Jade**

Baby: **Simone**

Support Person **Kyle - partner** Neonatologist:

Nurse: **Maria**

Pediatrician: **Dr.Williams**

Hospitalist / OB: **Dr. George**

Midwife: **Amanda**

Others:

Care Plans:

Me: *Keep fan close*
Keep cool with ice and wet facecloths

Baby: We're having a _____

Listen to baby on and off

Labor Progress: *Keep moving!*
Ball, stand and sway

Birth Preferences:

I'm so hot! *Lots of photos!*

Pain Management:

epidural eventually, wait if possible

At birth: No vacuum,
Kyle wants skin to skin too

Next Huddle:

After next exam (in a couple hours)

By request

DILATION CHART

1cm 2 cm 3 cm 4 cm 5 cm 6 cm 7 cm 8 cm 9 cm 10 cm
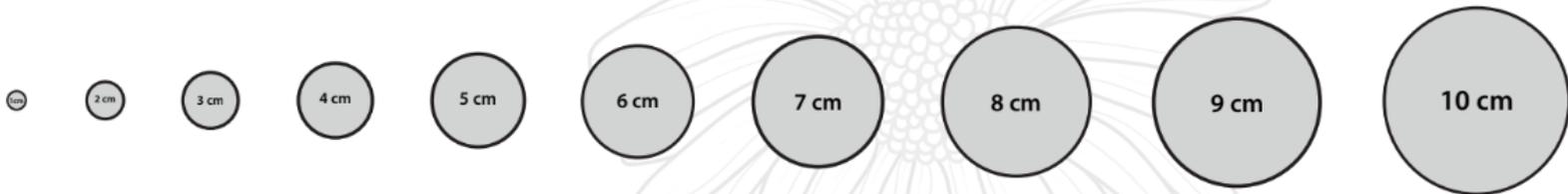
Design your tool

Get your team together and start designing your shared planning board

Work Plan Logistics

Needs Assessment	Planning	Completion

Design & Test

Draft	Test	Finalize

L&D Shared Planning Tool

TEAM	PLAN
	Me:
	Baby:
	Labor Progress:
PREFERENCES	NEXT HUDDLE
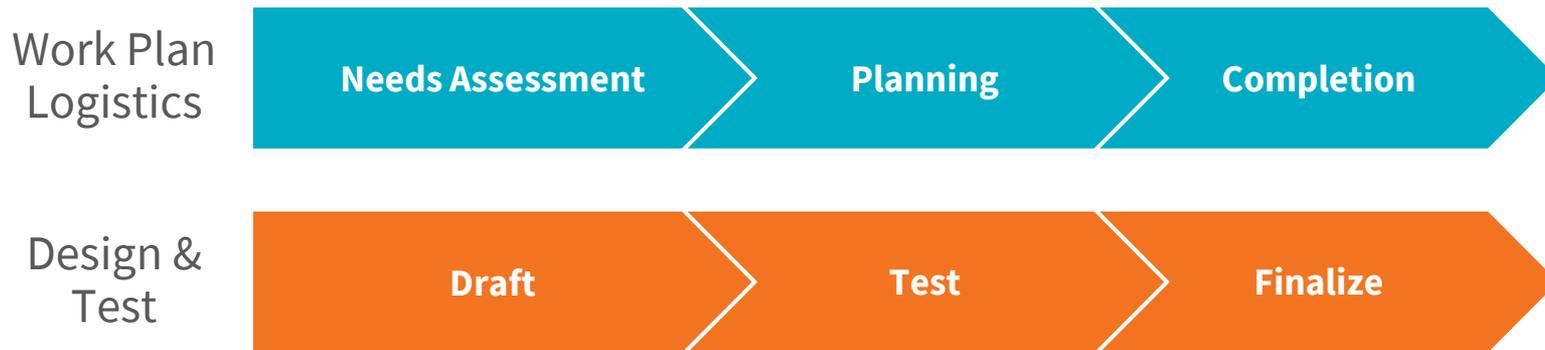
Design your tool

Create a work plan to ensure your team can manage the process efficiently

Work Plan Logistics

Needs Assessment	Planning	Completion

Needs Assessment
- ❏ How many rooms?
- ❏ What type of boards for each room: triage, postpartum, L&D, etc?
- ❏ Are frames needed?
- ❏ Dry erase or inserts?
- ❏ Writing utensils for each board?

Planning
- ❏ Establish available budget & desired timeline
- ❏ Identify vendor
- ❏ Clarify regulatory and branding requirements
- ❏ Engage relevant stakeholders: marketing, patient experience, purchasing, facilities, etc

Completion
- ❏ Work plan design and test activities
- ❏ Set deadlines for purchasing and installation
- ❏ Order boards
- ❏ Install boards

Design your tool

Use the TeamBirth Components resource to guide your unique adaptations

Design & Test

Draft	Test	Finalize

Draft
- ❑ **Review examples**
- ❑ **Edit the template**
- ❑ Get input from care team
- ❑ Get input from patients / advocates

Test
- ❑ Make a prototype with paper or a dry erase board
- ❑ Have champions try out the draft
- ❑ Use different Huddle scenarios with the draft
- ❑ Get feedback on what works and what doesn't

Finalize
- ❑ Update your draft based on feedback
- ❑ Finalize design with appropriate approvals
- ❑ Send your final design to your TeamBirth Coach for review

Shared Planning Board Timeline

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

We are here!

Launch!

FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV

Design Boards | **Finalize & Order Boards**
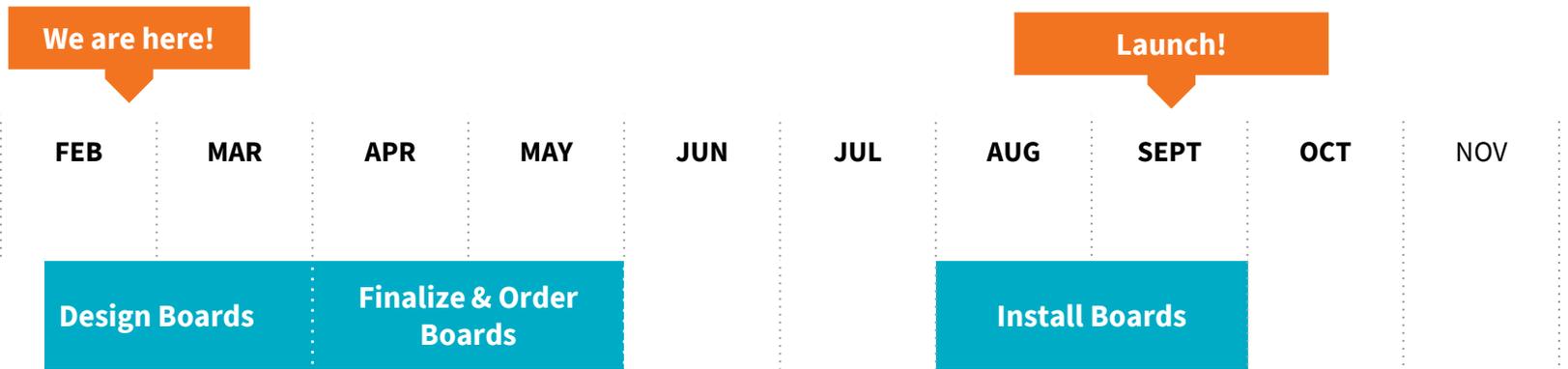
Install Boards

Boards are installed before launch day

Core Implementation Activity:
ASSESS YOUR CONTEXT

ASSESS YOUR CONTEXT

CORE: Survey leaders, implementers, and frontline staff and review results to learn how implementation can leverage strengths and address opportunities for improvement

OBJECTIVES

Understand how and why we use Atlas for conducting a context assessment

Prepare for surveying your staff with the digital surveys

Milestones:

❑ Pre-implementation survey results shared (before go live)
❑ Progress survey results shared (after go live)

ADAPT

Your strategies for administering the surveys and how you apply results to your implementation effort

Atlas makes context assessment **easier**, **quicker**, and **actionable**

Saves time with quick early surveys

Makes the "invisible" visible

Shows site-specific patterns over time

Informs implementation strategies

Fosters conversations across teams at every level

Contributes to innovative research

ARIADNE LABS

The Atlas Context Assessment

Surveys leaders, implementers, and frontline staff to learn how implementation can leverage strengths and address pain points

Survey	Why	When	How Long	Who*		
				L	S	I
Pre-Implementation	To inform decisions about readiness to implement and the design of the implementation strategy	**Before** launch	5 - 10 mins.			
Progress	To assess if the implementation plan is working and inform modifications to the plan	3-6 months **after** launch	5 - 10 mins.			

* L = leaders
S = staff (clinical frontline)
I = implementation team

The following statements are about THIS IMPROVEMENT WORK.

Leadership is committed to this improvement.

Agree	Somewhat Agree	Somewhat Disagree	Disagree	Don't Know
○	○	○	○	○

There are people in each of the disciplines involved in this improvement who will promote this work.

Agree	Somewhat Agree	Somewhat Disagree	Disagree	Don't Know	N/A
○	○	○	○	○	○

Surveys are **simple** and
shared with a **link or QR code**

The Atlas Context Assessment

Review of the reports during coaching calls will inform implementation planning

SITE CAPACITY

Areas for improvement   Strongest areas

ABILITY TO IMPLEMENT

INTERNAL CULTURE

COMMITMENT & MOTIVIATION

TEAM FUNCTIONALITY

Reports highlight strengths & opportunities for improvement

rker/Staff Perspective)

	Don't know	Don't agree	Slightly agree	Moderately agree	Mostly agree	Completely agree
		2 1	4		8	
2	3	1	2		8	
3	1 2	1		9		
4 the practice change.		2		8		
5 I am able to get the help I need to do the practice change.		2		11		
6 Our leaders can effectively lead this practice change.	1 1	4		9		
7 I have confidence in the implementation team's ability to implement this practice change.	1 2	3		9		

ARIADNE LABS
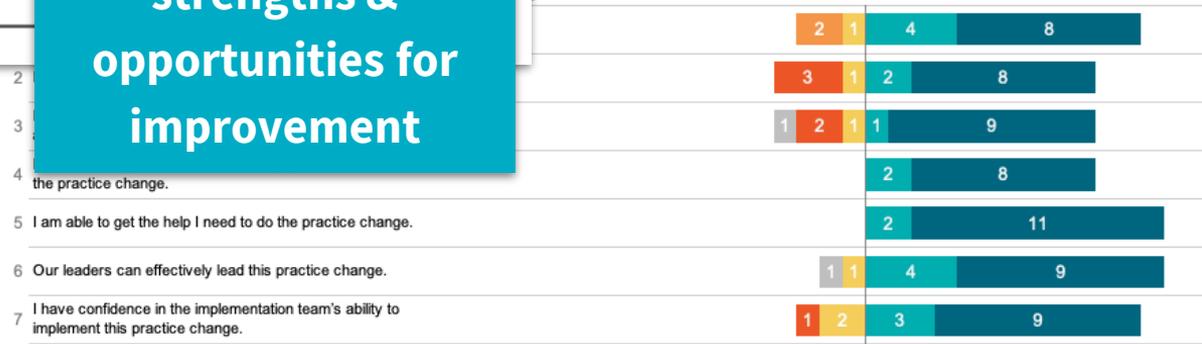
Looking Ahead

Implementation Timeline

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	+
Learning Sessions *4th Monday*	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10	#11	#12	

Go Live!

Coaching Calls

Activities

Atlas Survey

Champion Training

Staff Training

Baseline Patient Surveying

Patient Surveying

Today's Key Takeaways

Shared Planning Tool: PREFERENCES
- Opportunity to elicit what matters now - HEAR your patient here
- Can change over time

Shared Planning Tool: PLAN
- Written in patient friendly language
- Clearly distinguishes plans for: mom, baby, and labor progress
- Discussed at every Huddle even if no change is made

Develop Your Strategy
- Discuss project goals, timeline, and implementation strategies

Customize TeamBirth
- Plan for and start designing your site's shared planning tool

Assess Your Context
- Surveying staff to understand your strengths and opportunities for improvement

Action Items

| Implementation Pathway	Action Items	Details & Resources
General	Familiarize yourself with the NJ Cohort Resource Page and resources	**http://www.njhcqi.org/teambirthnjcohorts** **Password: NJcohorts2022!**
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
CUSTOMIZE TEAMBIRTH	Use this HOW TO resource to plan your process for tool design and testing; Start planning and drafting your boards	HOW TO | Customize Your Shared Planning Tool
	Review the examples resource	On the cohort resource page: **TeamBirth Board Examples and Board Evaluation Form**
ASSESS YOUR CONTEXT	Send a list of the number of staff and members	
	Prepare for Atlas Survey with leaders, staff, and providers	

Next Steps

Learning Session 3

March 25, 2026
1:00 - 2:00 pm EST

Share your feedback!

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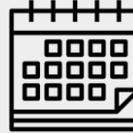
Coaching Calls

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

Email Armonie & Christine for

- Support and updates
- Resources
- Implementation Questions & Needs

armoniepierrejacques@njhcqi.org
civery@njhcqi.org