



TEAMBIRTH



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

New Jersey Post-launch Collaborative Learning Session July 27, 2026



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 \$7,500,000. 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 [HRSA.gov](https://www.hrsa.gov).

Learning Session Agenda

Welcome

- NJHCQI & Ariadne Labs
- NJ Team Birth Cohorts

TeamBirth Spotlights

- Overlook Medical Center
- Englewood Hospital and Medical Center

Practicing Core Knowledge & Skills

TeamBirth Sustainability

- Evaluate Impact and Continuously Improve

Scenario Practice: Postpartum Newborn Huddle

Next Steps

- Looking ahead

Welcome



NJHCQI TeamBirth Websites

Access all cohort resources at this **private website**

www.njhcqi.org/teambirthnjcohorts

Password: NJcohorts2022!

Public TeamBirth NJ website

www.njhcqi.org/shared-decision-making

NEW JERSEY HEALTH CARE

 QUALITY INSTITUTE

WHO WE AREOUR WORKMEDIARESOURCESEVENTS

TEAMBIRTH NJ
COHORT RESOURCE PAGE

TeamBirth is a shared decision-making program that aims to improve safe and respectful childbirth care.

It involves a series of team huddles and other tools used during labor and delivery, to improve communication and ensure care that aligns with patient preferences.

Developed by Ariadne Labs, TeamBirth was designed to operationalize best practices in communication, teamwork, and clinical care, in collaboration with experts from the major professional organizations in obstetrics in the United States, including ACOG, SMFM, ACNM, and AWHONN. The goal is to ensure these practices are occurring reliably with all patients throughout every labor.



Why TeamBirth?

Watch on YouTube

COLLABORATIVE LEARNING SESSION SLIDES

SESSION 1

May 2024

SLIDE DECK

SESSION HANDOUT #1

SESSION 2

June 2024

SLIDE DECK

SESSION HANDOUT #2

RESOURCES

GENERAL TEAMBIRTH INFORMATION

- [Click here](#) to watch the Why TeamBirth video
- Download the [Why TeamBirth Infographic](#)
- Download [TeamBirth Board Examples](#)
- Review [TeamBirth Components](#) – includes core components and add-on components
- View the [TeamBirth Socializing Package](#)

Englewood Medical Center

Welcome!!



TeamBirth NJ Spotlights



Overlook Medical Center- TeamBirth NJ Spotlight

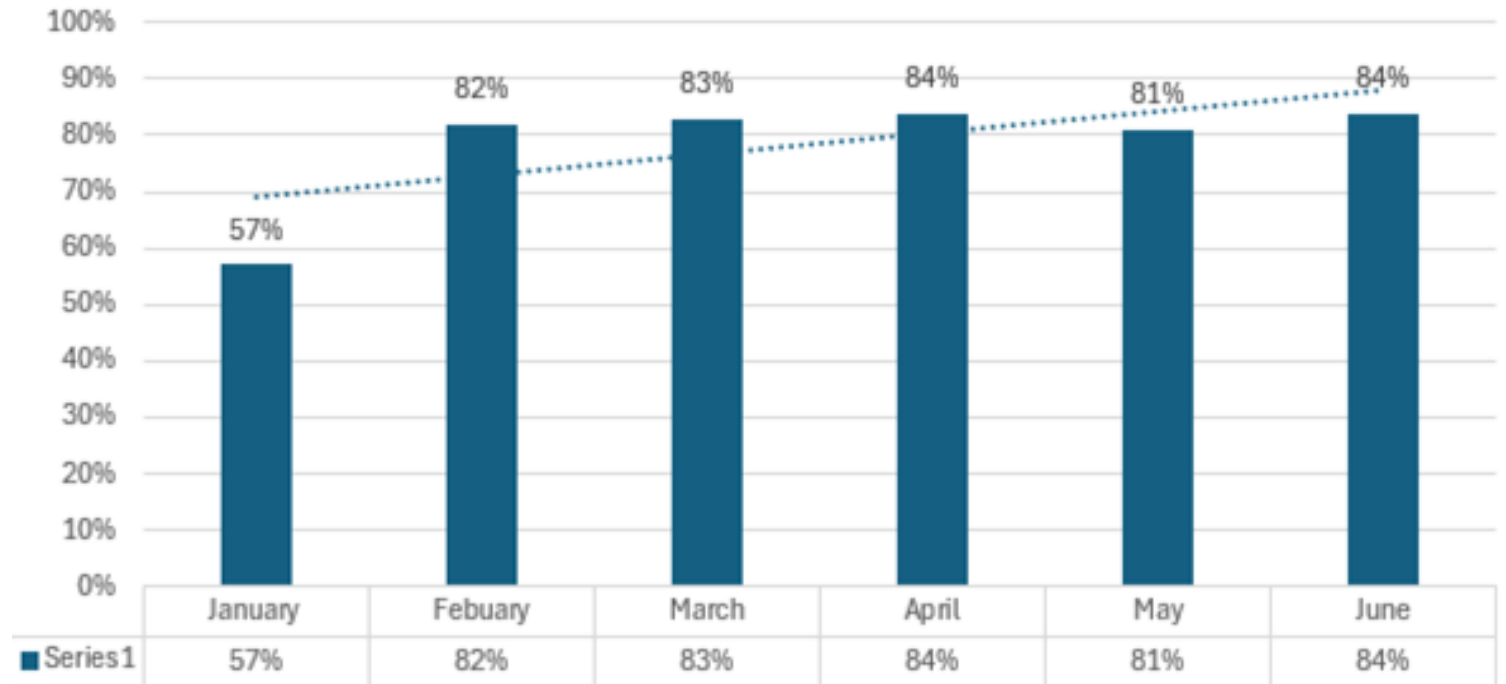
1. EMR documentation with TeamBirth during launch
 - Criteria see one huddle
1. Breastfeeding rates
 - Lactation TeamBirth huddles



TeamBirth Strategies

- Addition of TeamBirth to EMR flowsheet documentation
 - Goal: Run statistics on percentage of TB documented on births for month
- Documentation
 - TeamBirth: Yes or declined
 - Reason for communication
 - Status change: fetal, maternal or other
 - Team members present

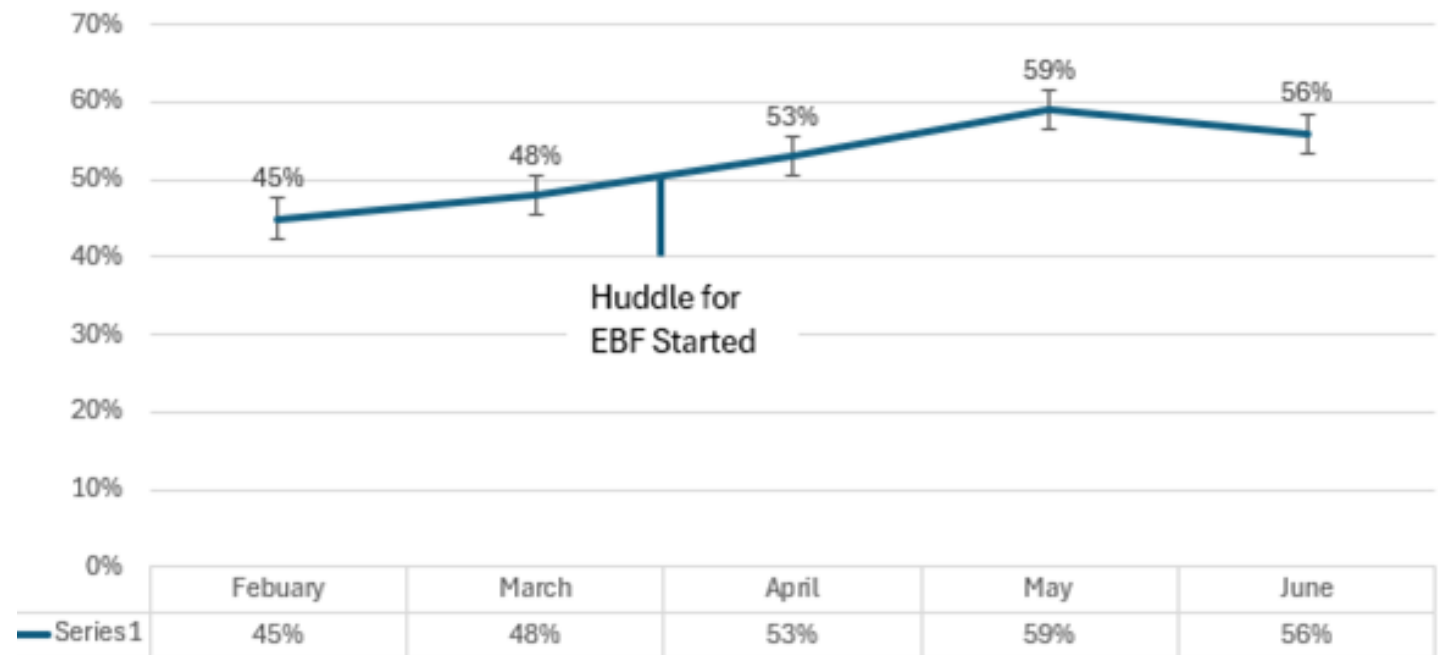
TeamBirth Huddles
Data Based on Epic Documentation



TeamBirth: Exclusive Breastfeeding Supplementation Huddle

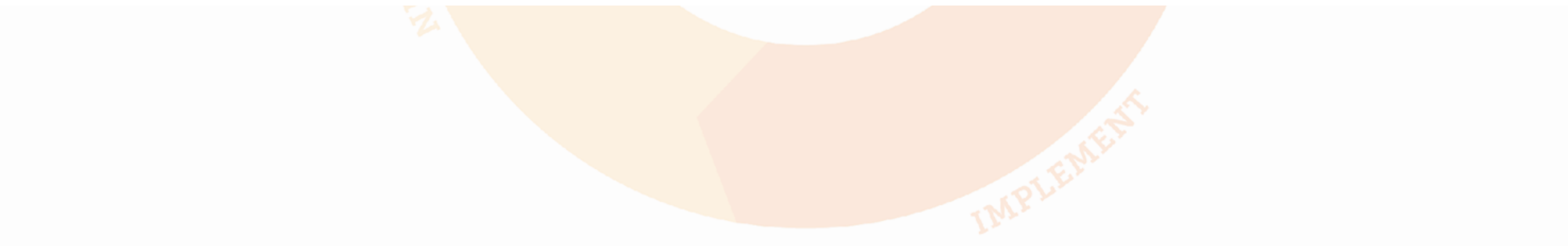
- Team education on TB exclusive breastfeeding non-medical supplementation of formula huddle
 - Discuss preferences
 - Supplementing with EBM
 - Educate on alternatives (if applicable)
 - Hand expression
 - Cup, spoon, and syringe feeding
 - Paced bottle feeding
 - Infant stomach size

TeamBirth: Exclusive Breastfeeding Supplementation Huddle





Core Implementation Activity:
EVALUATE IMPACT & CONTINUOUSLY IMPROVE





SUSTAIN PHASE

EVALUATE IMPACT & CONTINUOUSLY IMPROVE

CORE: Measure and evaluate TeamBirth's impact on key indicators, disaggregated by demographics, to celebrate success and identify needs for improvement

OBJECTIVES

Ensure necessary data is collected and analyzed to measure impact

Conduct ongoing QI activities to ensure TeamBirth quality, fidelity, and sustainability

Milestones:

- ❑ Ongoing improvement goals identified
- ❑ Impact measured annually post launch

ADAPT

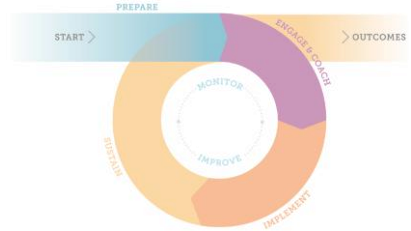
Who you involve and your methods and timeline for analysis, prioritization, planning, and improving



Ongoing Measurement

Establish key performance indicators that monitor TeamBirth, show impact, and inform opportunities for ongoing quality improvement

- **Identify and plan** for how you will measure TeamBirth success in the long-term
 - What process metrics &/or indicators of success will you track and monitor?
- Integrate **patient surveying** into existing patient feedback mechanisms
- Develop **EHR fields** to document and track TeamBirth activities



Patient Surveying

Integrate patient surveying into existing patient feedback mechanisms

New Jersey TeamBirth Patient Survey

Thank you for taking the time to participate in this survey about your childbirth experience! The survey should take around 10 minutes to complete, and your answers will remain entirely confidential. We will not collect any information that could personally identify you. Your responses, combined with those of others, will be used to inform efforts to enhance the quality of care provided and improve childbirth experiences for individuals giving birth at this hospital.

Your participation in the survey is completely voluntary, and you are free to stop at any point if you do not wish to continue. If you have any questions or concerns, or if you would like to be contacted for further follow-up, please let your health care team know.

Preferences

1) We define the clinical team as the nurse, physician, and midwife, if present. In this next section, please describe your experiences with your clinical team overall during your labor and birth. Select one answer for each row.

	Completely Disagree	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree	Completely Agree	Prefer Not to Answer
My clinical team asked me how involved in decision making I wanted to be	☐	☐	☐	☐	☐	☐	☐
My clinical team told me that there are different options for my maternity care	☐	☐	☐	☐	☐	☐	☐
My clinical team explained the advantages and disadvantages of the maternity care options	☐	☐	☐	☐	☐	☐	☐
My clinical team helped me understand all the information	☐	☐	☐	☐	☐	☐	☐

1

b) No
c) Not Sure

2

d) Some college
e) College degree

4

3. During your observation of the huddle, were the team members' names written on the shared planning board, either during this huddle or previously?

☐ Yes, always

☐ Yes, some - please specify which roles were missing

☐ No - names were discussed but no one updated the board

☐ No - names were not updated or discussed

☐ I was a member of this huddle (self-observer)

4. Who discussed the preferences/concerns of the mom/birthing person? **Select all that apply.**

How can you continue to ensure patient experiences are guiding TeamBirth improvement?

- Use our template to develop your own REDCap or Qualtrics survey
 - Add several priority questions to existing patient surveying mechanisms
- Develop a plan to survey a certain % of patients routinely (e.g. quarterly) and report on learnings from that data to leadership and staff

TeamBirth Sustainability Survey

INSERT HOSPITAL NAME would like to know about your experience with TeamBirth huddles and shared-decision making with your clinical team during this hospital stay. We invite you to take part in this survey to share your feedback. The survey will take about 3 minutes to complete. You can stop at any time, and you can skip questions that you prefer not to answer. If you do not take this survey, the health care you receive will not be affected in any way. Your responses will be anonymous with no ability to identify you. Once you are home, you may also receive a separate, hospital-wide survey via phone call. Please consider participating in that survey as well. Your participation in this survey is optional. There is no direct benefit to you for participating in this survey, and you will not be paid for participating.

Please describe your experiences with decision making during your hospital stay. (select one option for each statement)	Completely Disagree	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree	Completely Agree
1. My clinical team asked me how involved in decision making I wanted to be.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
2. My clinical team told me that there are different options for my maternity care.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
3. My clinical team explained the advantages and disadvantages of the maternal care options.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
4. My clinical team helped me understand all the information.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
5. I was given enough time to thoroughly consider the different maternity care options.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
6. I was able to choose what I considered to be the best care options.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
7. My clinical team respected that choice.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

Tool Citation: Vedam, S., Stoll, K., Martin, K., Rubashkin, N., Partridge, S., Thordarson, D., & Jolicœur, G. (2017). The Mother's Autonomy in Decision Making (MADM) scale: Patient-led development and psychometric testing of a new instrument to evaluate experience of maternity care. PLoS one, 12(2), e0171804. <https://doi.org/10.1371/journal.pone.0171804>

Please review the questions and/or statements in each row. (select one option for each statement)	None of the time	A little of the time	A moderate amount of time	Most of the time	All of the time
8. How often did a member of your team update the names of care team members on the board?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
9. How often did your doctor/midwife and nurse discuss your preferences/ concerns and update the board?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
10. How often did your doctor/midwife and nurse discuss care plans and update the board?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
11. How often did your doctor/midwife and nurse set a plan for the next huddle and update the board?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5



Example TeamBirth EHR Fields - Epic

Team Birth Huddle	
Team BirthHuddle initiated	Yes
Team members present	
Whiteboard discussion./update	

Team members present

Select Multiple Options: (F5)

- Patient
- Significant Other
- Support Person
- Nurse
- OB Provider
- Midwife
- Doula
- Neonatology Provider
- MFM Provider
- Anesthesia Provide
- Other (Comment)

Whiteboard discussion./update

Select Multiple Options: (F5)

- Whiteboard Update
- Patient Preferences
- Mom Status/Plan
- Baby Status/Plan
- Progress Status/Plan
- Next Huddle

Example TeamBirth EHR Fields - Epic



Epic Home Service Task L&D Grease Board L&D Manager ReportHTML Assistance Soapboard Patient Lists

Test, Rectthree

RT

Summary Chart Recon... Results Work List Flowsheets Notes Education Ca

Flowsheets

File Add Rows LDA Avatar Add Col Insert Col Data Validate Hide Device Data

Vital Signs Vigilance/Perigen Intake/Output OB Triage Care Record OB Patient Profile Labor Rec

Accordian Expanded View All

1m 5m 10m 15m 30m 1h 2h 4h 8h 24h Interval Start: 0700 Reset Now

Admission (Current) from 7/22...

Search (Alt+Comma) 1500 Last Filed

Deep Tendon Reflexes

Additional Documentation

Amniotfusion

Additional Documentation

Notification

Provider Name/Title

Provider Role

Family member notified

Method of Communication

Reason for Communication

OB Reason for Communication

Response

Notification Time

Notification Exception

TeamBirth Huddle

TeamBirth Huddle

TeamBirth Huddle Participants

Intrapartum Charges (This Phase STOPS at Delivery of Placenta)

Intrapartum Class 1

Patient

COVID-19: Unknown

Isolation: None

Infectious Screening Incomplete

Physician Obstetrics Attending

Primary Cvg: None

Allergies: Not on File

PPH Risk:

TRIAGE

Cervical Exam: None

ROM: No data

THIS PREGNANCY

Hx (GTPAL): G3P1010

GA: 34w4d (8/29/2022)

Blood Type: None

L&D ENCOUNTER: TODAY

Patient Class: Extended Hospital Outpatient

No active principal problem

7/22/22 1500

TeamBirth Huddle

Select single option (F5)

Yes

No

Comments (Alt+M)

7/22/22 1500

TeamBirth Huddle Participants

Select multiple options (F5)

Provider

Primary Nurse

Anesthesia Provider

Consulting Provider

Doula

Resident

Support Person

Charge Nurse

Pediatric Provider



Example TeamBirth EHR Fields - Cerner

✓ Magnesium Sulfate Therapy	Blue Band Applied
✓ Neurological Assessment	Preeclampsia Additional Comments
✓ Respiratory Assessment	Team Birth
Seizure Assessment	Members Present for Huddle
Team Birth	Whiteboard Huddle/Update
Psychosocial - OB	Team Birth Additional Comments
✓ Membrane Status	Psychosocial - OB

09:28 AM 09:25 AM 09:15 AM 09:00 AM

☒ **Members Present for Huddle** X

- ☐ Patient
- ☐ Significant other
- ☐ Doula
- ☐ Support people
- ☐ Nurse
- ☐ Charge RN
- ☐ OB Provider
- ☐ MFM Provider
- ☐ OB Hospitalist
- ☐ Midwife
- ☐ Anesthesia
- ☐ Pediatrician
- ☐ Neonatologist
- ☐ Social Worker
- ☐ Dietary
- ☐ Other

09:28 AM 09:25 AM 09:15 AM 09:00 AM 08:45

☒ **Whiteboard Huddle/Update** X

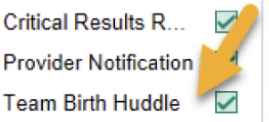
- ☐ Team members current
- ☐ Patient preferences
- ☐ Mom status/plan
- ☐ Baby status/plan
- ☐ Progress status/plan
- ☐ Next assessment
- ☐ Decision aid reviewed
- ☐ Other



Example EHR Fields Onboarding

Team Birth Huddle – Nurse Documentation

Team Birth Huddle documentation is available in the following Flowsheets: **Labor, Postpartum, and Newborn Nursery Assess**. It is located just under Provider Notification in all three templates.



When you document that a Team Birth Huddle was initiated, the following rows will display: “Team Members Present” and “Whiteboard Discussion/Update.”

Team Birth Huddle
Team Birth Huddle Initiated?
Team Members Present
Whiteboard Discussion/Update

If the “Discussion to Deliver” tool was used during the huddle, make sure to document that in the Whiteboard Discussion/Update row:

Team members current
Patient preferences
Patient status / plan
Baby status / plan
Progress status / plan
Next assessment
Timeline
Discussion to Deliver tool used

Noting Discussion Guide use

When you write your Plan of Care note, all Team Birth Huddle documentation from the past 12 hours will automatically display for review:

Team Birth Huddles for the past 12 hrs:		
	Team Members Present	Whiteboard Discussion/Update
10/20/23 1500	Patient; Significant other; OB provider; Social Worker	Team members current; Patient status / plan; Timeline

Team Birth Huddle – OB Documentation

To allow Team Birth Huddles to be documented in Epic, a new SmartPhrase is available for use in your Progress Notes: **.BIRTHHUDDLE**

When you use .BIRTHHUDDLE the following template displays in your note:

Team Birth Huddle Discussion
[Team Birth Huddle Discussion:304150001]

Summary: ***

Patient preferences
Patient status/plan
Baby status/plan
Progress status/plan
Next assessment
Timeline
Discussion to Deliver Tool used

Select the topics discussed during the huddle from the list, and add any additional information needed in the “Summary” section.

Selections from the topic list are filed discretely to the chart as SmartData Elements. This allows reporting on what types of huddles have occurred as well as if the Discussion to Deliver Tool was utilized during care.

Custom TeamBirth Smartphrases

The .BIRTHHUDDLE SmartPhrase can be placed into any personalized note templates you use if you would like it to show automatically, such as an antepartum progress note template.

If you would prefer to create your own format for displaying this information (such as removing the Summary section), you will still need to include the topic list selection as it contains data elements used for reporting.

SmartList ID: 304150001 – OHA IP CBC TEAM BIRTH HUDDLE DISCUSSION

Example TeamBirth Dashboard

Team Birth Huddle Info

excludes planned cesareans

Delivery Provider

(All)

Admission Date

Last 13 months

Data Updated 2/1/2024

Total # Huddles

2,223

Avg # of huddles per patient

0.6429

Avg # of huddles for vag births

0.6872

Avg # of huddles for cesareans

0.5781

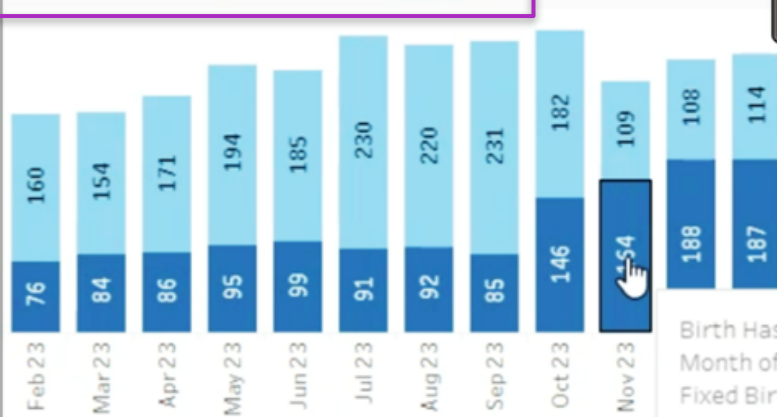
% of Births with 1+ Huddle



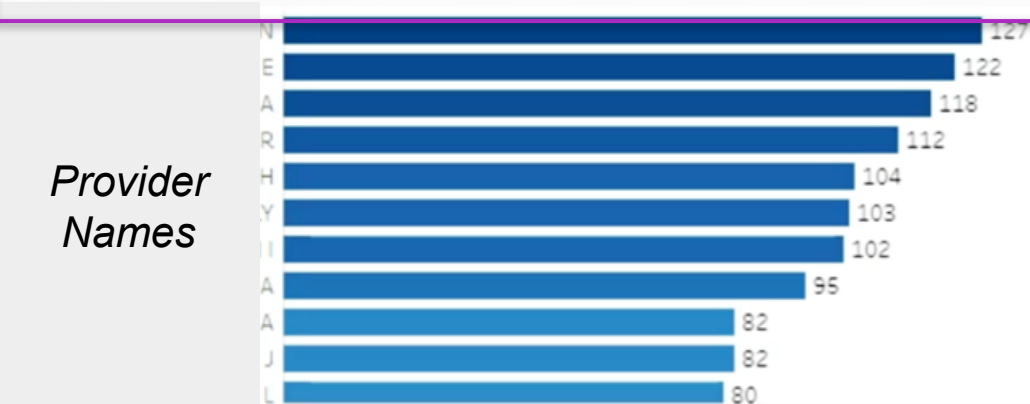
% of Births with 2+ Huddles



births WITH vs W/OUT huddle by month



Huddles per Delivering Provider



Provider Names

births w/o huddle by provider



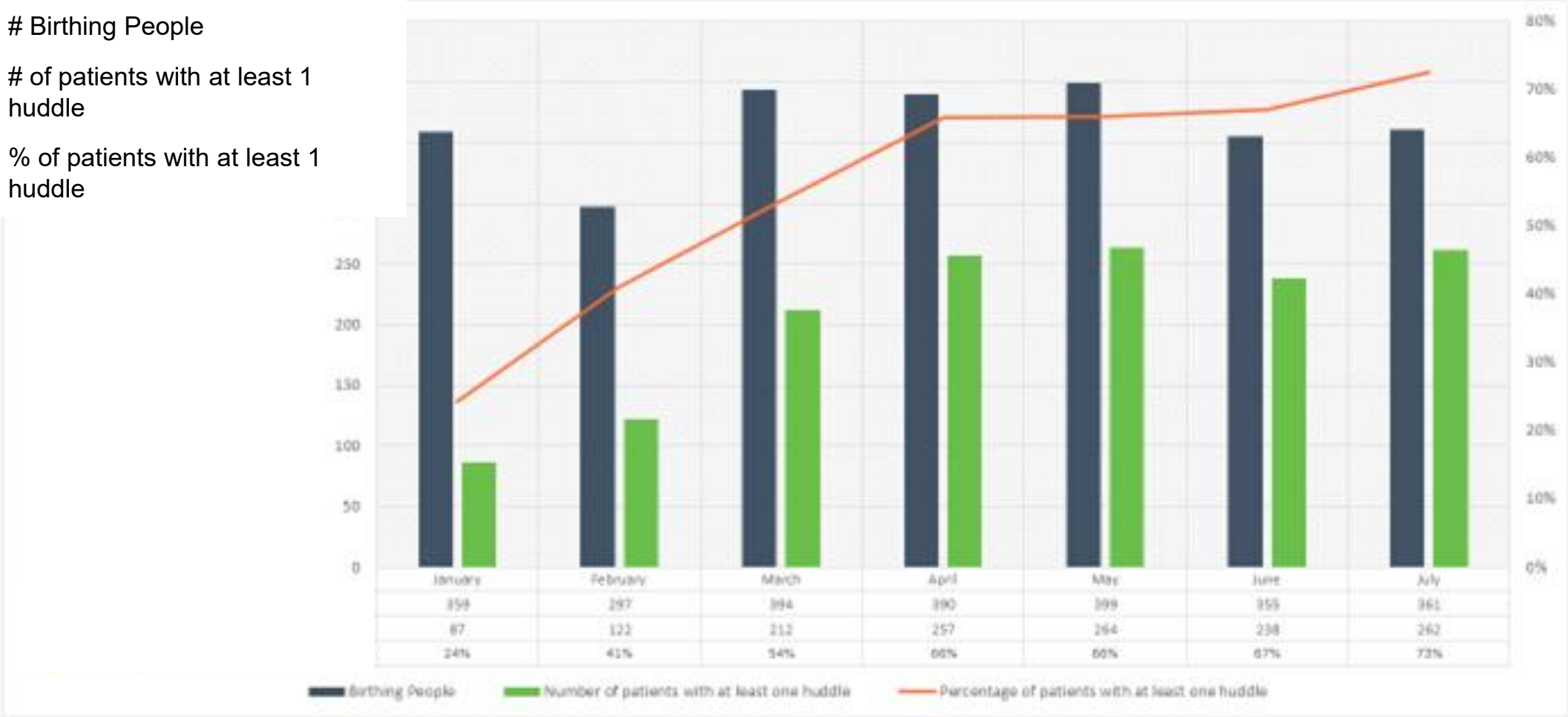
Provider Names



Example TeamBirth Reporting

Percentage of Birthing People with at least one huddle

- # Birthing People
- # of patients with at least 1 huddle
- % of patients with at least 1 huddle





Continuous improvement

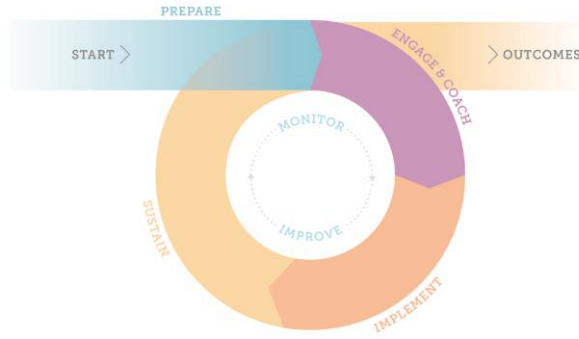
Data informs opportunities for ongoing quality improvement

Iterating and expanding

- A role (see Leadership Accountability) should be responsible for **tracking/analyzing data and reporting progress** to leaders and staff
- Data should be used to **inform decisions** about where to focus improvement efforts
- Identify **opportunities to expand TeamBirth** into other units, prenatal care, or community programs
- Leverage successes in TeamBirth's culture change and teamwork to **support future quality improvement initiatives**

Practicing Core Knowledge & Skills





Checking In Initiating TeamBirth Huddles

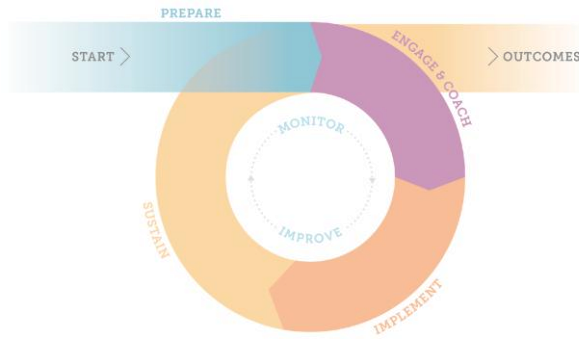
Current Use and Implementation

- ☐ What has made it easier for staff to call and introduce a TeamBirth huddle?
- ☐ What challenges or barriers have you experienced introducing TeamBirth huddles?



Looking Ahead





What's Next?

- Reflect on TeamBirth Sustainability
 - Huddle Practice and Initiation of TeamBirth
 - Evaluate Impact and Continuous Improvement
- TeamBirth Sustainability Tools Check-in
 - Sustainability Survey
 - Training Scenario Prompts
 - TeamBirth Resources and Materials

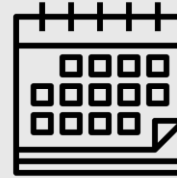
Next Steps

Next Learning Session

TeamBirth Post Launch Support Session

October 26th, 2026

12:00 - 1:00pm EST



Follow Up

A follow up email with key Post Launch Session points will be sent



Email Christine for

- Support and Updates
- Resources
- Implementation Questions & Needs

civery@njhcqi.org

We Want to Hear From You!

- Anonymous
- Short survey
- What has been challenging or successful?
- Which topic would be helpful for the next meeting?

