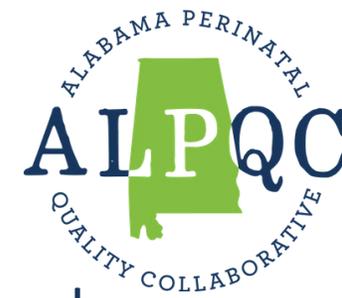




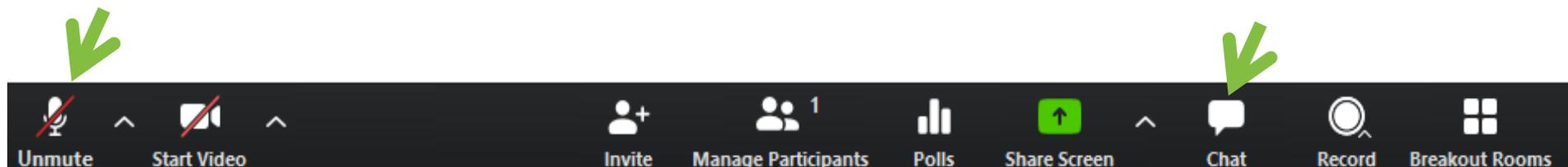
Neonatal Initiatives

Action Period Call
February 28th, 2024
12:00 – 1:00 PM CT



Welcome

- Please type your **name** and the **organization** you represent in the chat box and send to "Everyone."
- Please click on the three dots in the upper right corner of your Zoom image, click "Rename" and put your name and organization.
- Please also do for all those in the room with you viewing the webinar.
- Attendees are automatically muted to reduce background noise.
- You may enter questions/comments in the "chat" box during the presentation. We will have a Q&A session at the end.
- Slides will be available via email and at <http://www.alpqc.org/initiatives/nhp>
- **We will be recording this call to share, along with any slides.**



Agenda



Activity	Time
Welcome, Updates, & Reminders	12:00-12:10
Breakout Session	12:10-12:15
Why Hypothermia Matters	12:15-12:30
REDCap Data Entry	12:30-12:40
Q&A	12:40-12:50
NOWS Sustainability Data	12:50-12:55
Next Steps	12:55-1:00



Updates



Updates & Reminders

- Enrollment is still open for the neonatal initiatives, see alpqc.org for link to enrollment and additional information
- Baseline data (Dec-Feb) due March 31, 2024
 - Survey sent out on February 14th
 - Surveys to be sent out on the 15th of every month going forward
- Be sure and check out our website for resources and information on data collection as you begin the initiative



Data Resources

www.alpqc.org/initiatives/nhp

Initiative Enrollment

KEY DOCUMENTS

CLINICAL DOCUMENTS +

QUALITY IMPROVEMENT TOOLS +

DATA RESOURCES -

- [NHP Data Collection Worksheet](#)
- [Expanded Delivery Room Data Collection Worksheet](#)
- [NHP Data Collection Form](#) (PDF)
- [Expanded Delivery Room Data Collection Form](#) (PDF)
- [NHP Data Measures Form](#) -updated 01/23/2024
- [Expanded Delivery Room Data Measures Form](#) – updated 01/23/2024
- [How to Use Random Number Generator](#) (PDF)

OTHER RESOURCES +

NHP Hospital Enrollment	
Ascension St. Vincent's	Decatur Morgan Hospital
Brookwood Baptist Health	Helen Keller Hospital
East Alabama Medical Center	USA Providence
Huntsville Hospital Women & Children	Baptist Medical Center East
Madison Hospital	Crestwood Medical Center
Medical West Hospital	Flowers Hospital
Russell Medical	Jackson Hospital
UAB	Grandview Medical Center
USA	DCH Regional Medical Center
Marshall Medical Center North	Northport Medical Center
Marshall Medical Center South	Baptist Medical Center South
Gadsden Regional	Medical Center Enterprise



Breakout Session

Hypothermia Prevention Key Driver Diagram

Global Aims

To optimize care delivery practices for infants born in the state of Alabama.

SMART Aims

By July 1, 2025, in infants born at
1) Level I-II and 2) Level III+

1) Outcome measure: Reduce the proportion of infants that are hypothermic on admission by 20%
2) Balancing measure: Maintain the proportion of infants that are hyperthermic at delivery

Population

Infants born at delivery hospitals in the state of Alabama.

Drivers

Readiness: Optimize preparation prior to delivery

Management: Optimize support throughout delivery

Debrief: Real time identification of opportunities for improvement

Education: Provide resources to staff, patients, and families.

Interventions

Standardize delivery room temperatures

Checklist of supplies for delivery

Pre-warm radiant warmer to 100%

Use of warm towel to receive baby

Timely application of head cap

Temperature check at 10 min

Complete a debrief form for hypothermic deliveries

In hypothermic infants, check temperature every 10 minutes until normothermic

Systematic dissemination of best care practices to stakeholders

Systematic dissemination of hypothermia prevention performance



Breakout Session – 5 Minutes

- Breakout groups are categorized by level of care.
 - You should be assigned to a specific breakout room. Please see following slide for room assignments
- Please introduce yourselves and share:
 - How are you collecting data for this initiative?
 - IT reports, chart review?
 - Which initial intervention(s) are you considering for hypothermia prevention?
- Please turn on your camera if possible

Breakout Rooms



Room 1:

Russell Medical Center
Medical Center Enterprise
Marshall Medical Center North
Marshall Medical Center South
USA Providence

Room 2:

UAB Med West
Flowers
Jackson
Gadsden

Room 3:

Madison
Helen Keller
Decatur Morgan
Crestwood

Room 4:

UAB
Grandview
St. Vincent's
Brookwood
USA
Huntsville

Room 5:

DCH Regional Medical Center
Northport
Baptist East
Baptist South
EAMC



Why Hypothermia Matters



Why Do Babies Get Cold?

Because babies lack protective mechanisms,
it is up to us the providers to prevent
them from getting cold

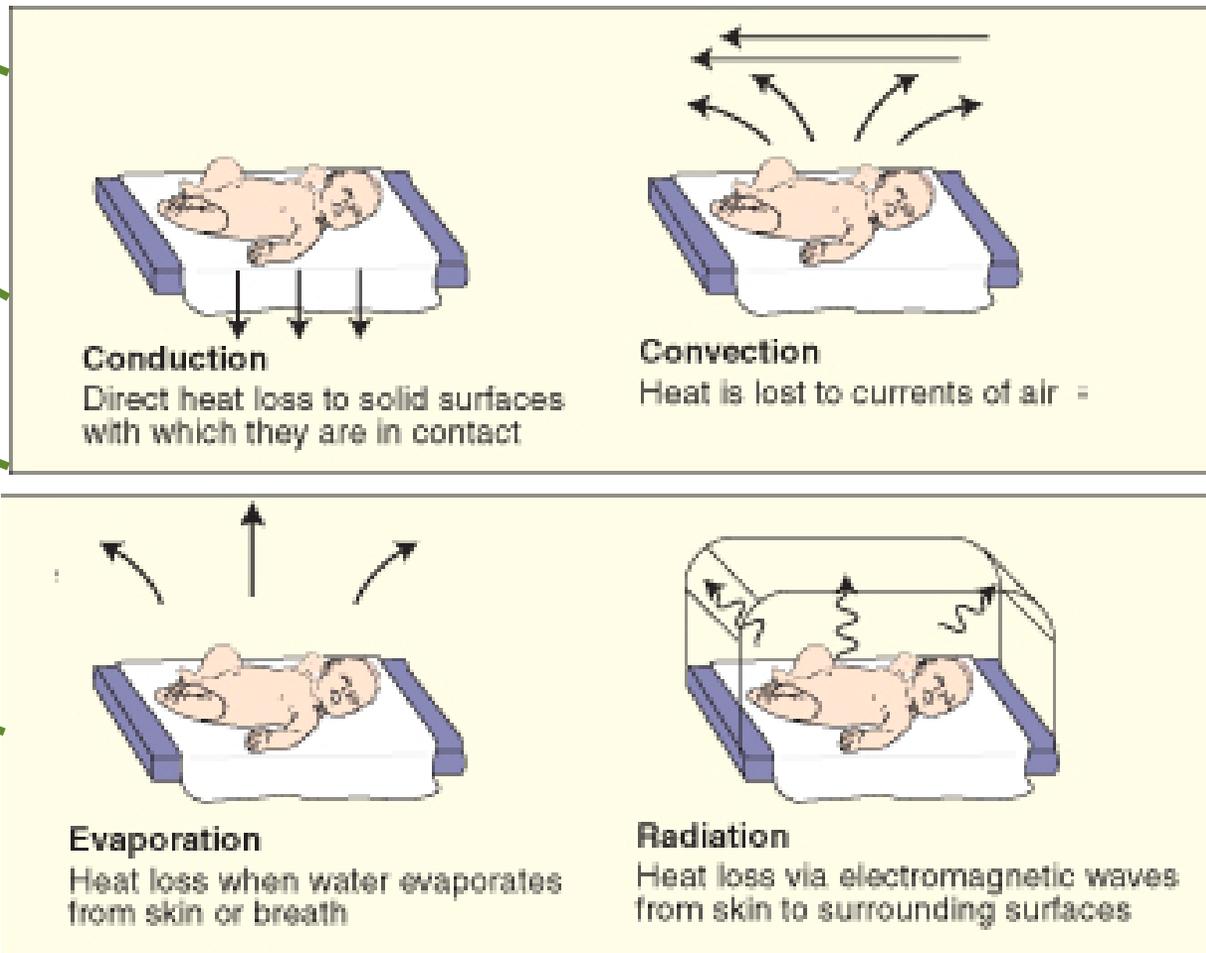
How Do Babies Get Cold?

Timely initiation of radiant warmer?

Consistent use of warm surface to receive infants?

Timely removal of wet towels?

Timely drying of infants after delivery?

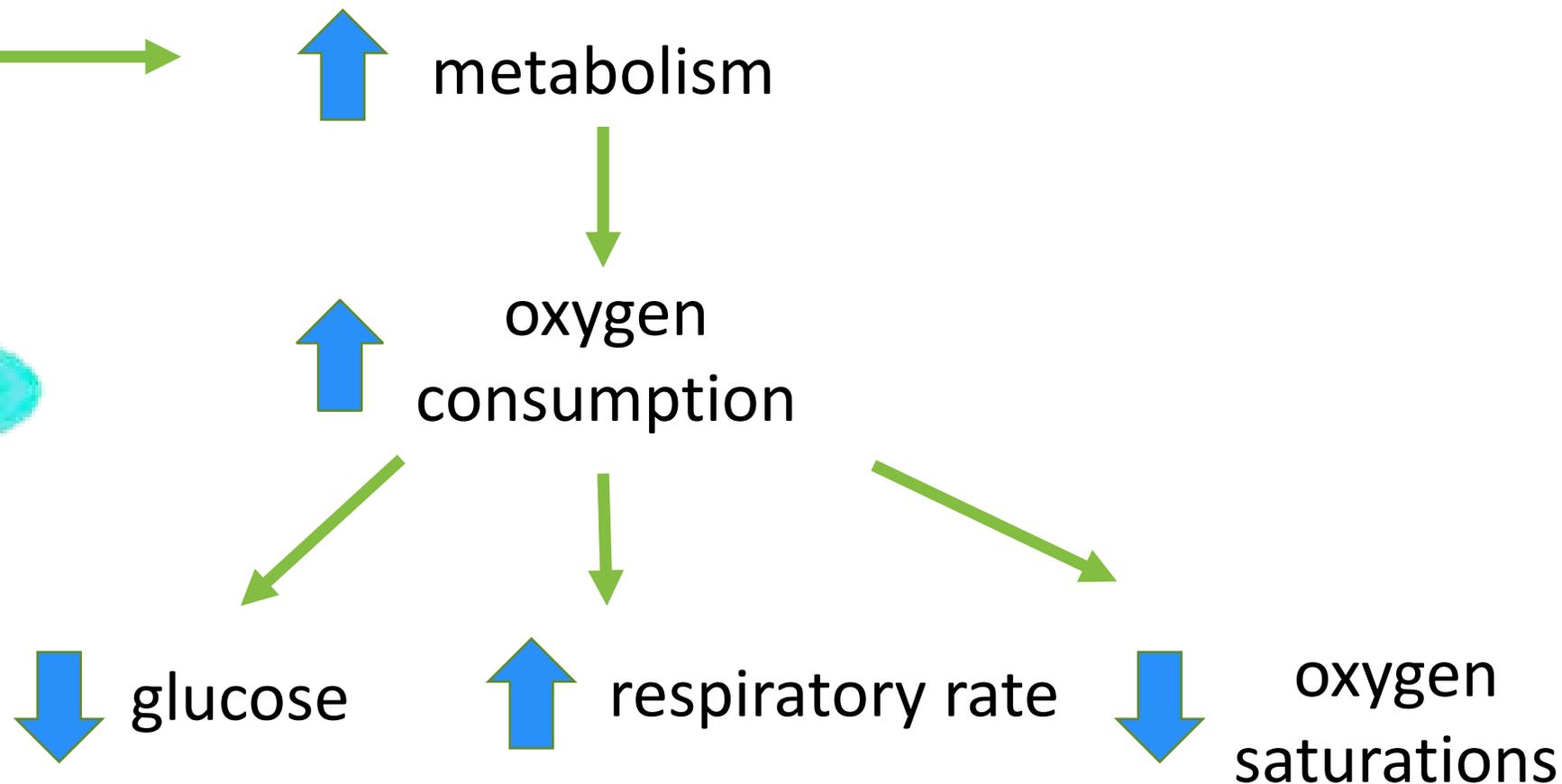


Systematic ambient temperature setting?

Use of sidewalls of radiant warmer?

Any sources of cold air near resuscitation?

What Happens When They're Cold

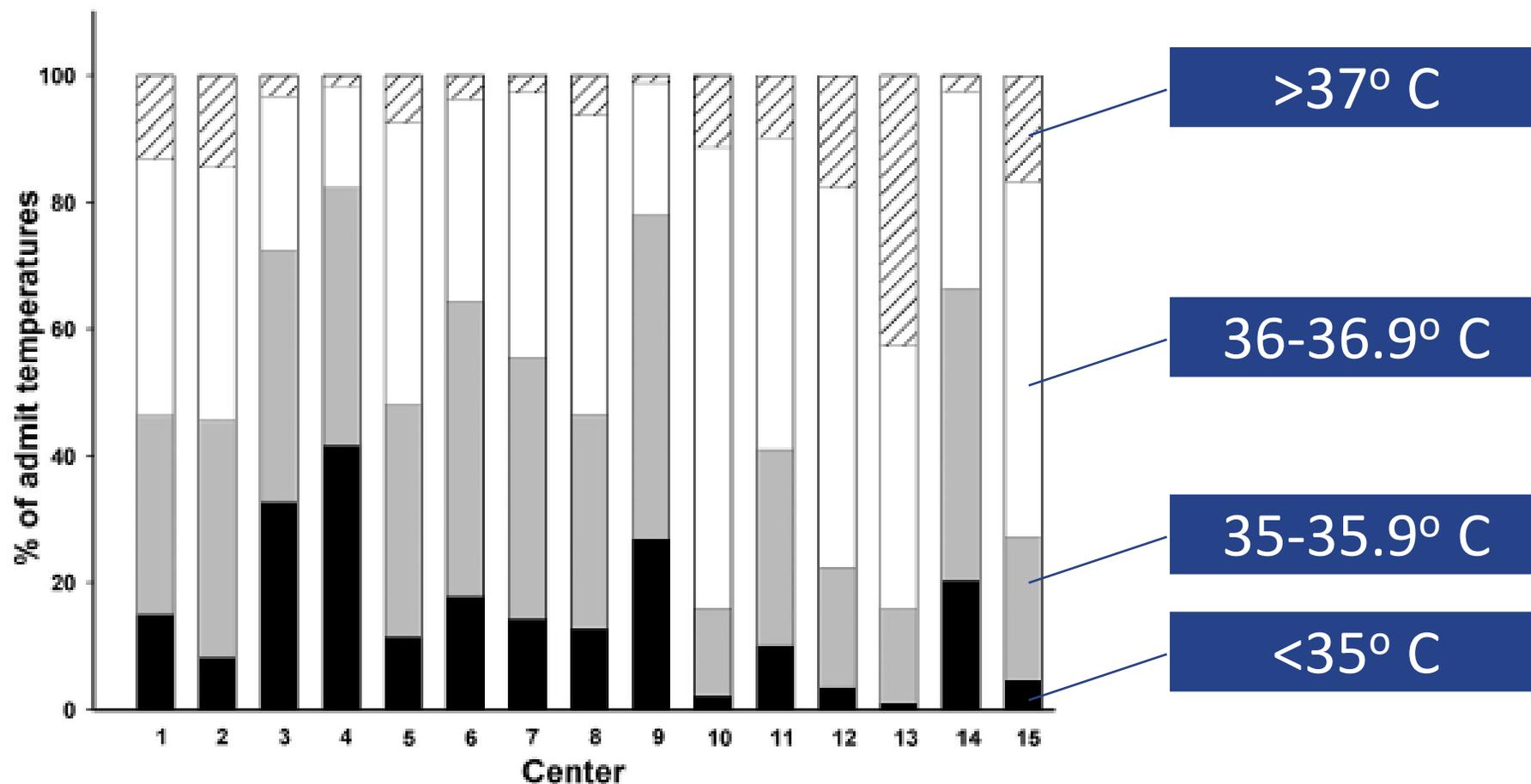




What About in Our Smallest Infants?

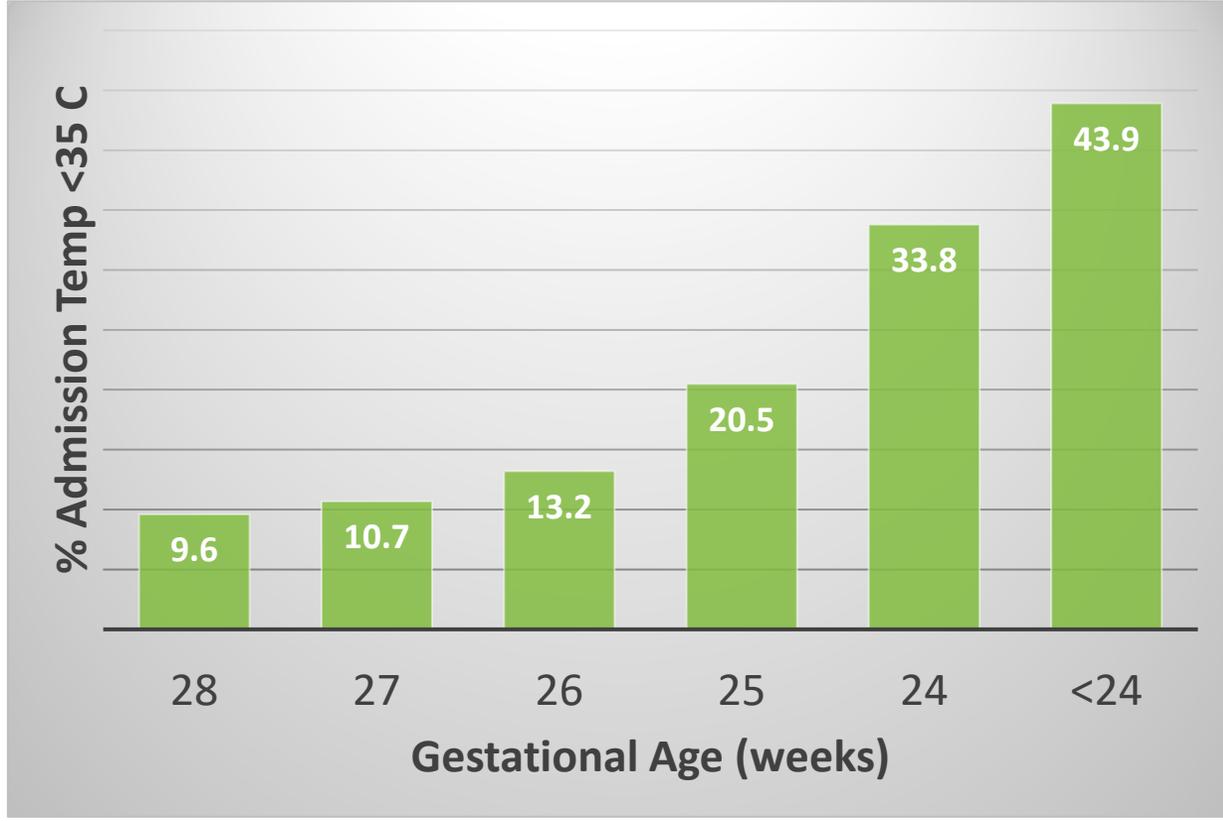
- Study within 15 centers of the Neonatal Research Network
- 5277 infants were included with an average gestation of 28 weeks
- Related first admission temperature to neonatal outcomes
- Outcomes:
 - Late onset sepsis
 - Necrotizing enterocolitis
 - Grade III or IV intraventricular hemorrhage
 - Death after 12 hours
- Adjusted for baseline differences using multivariable regressions

Hypothermia Outcomes by Center





Admission Temperature in VLBW Infants



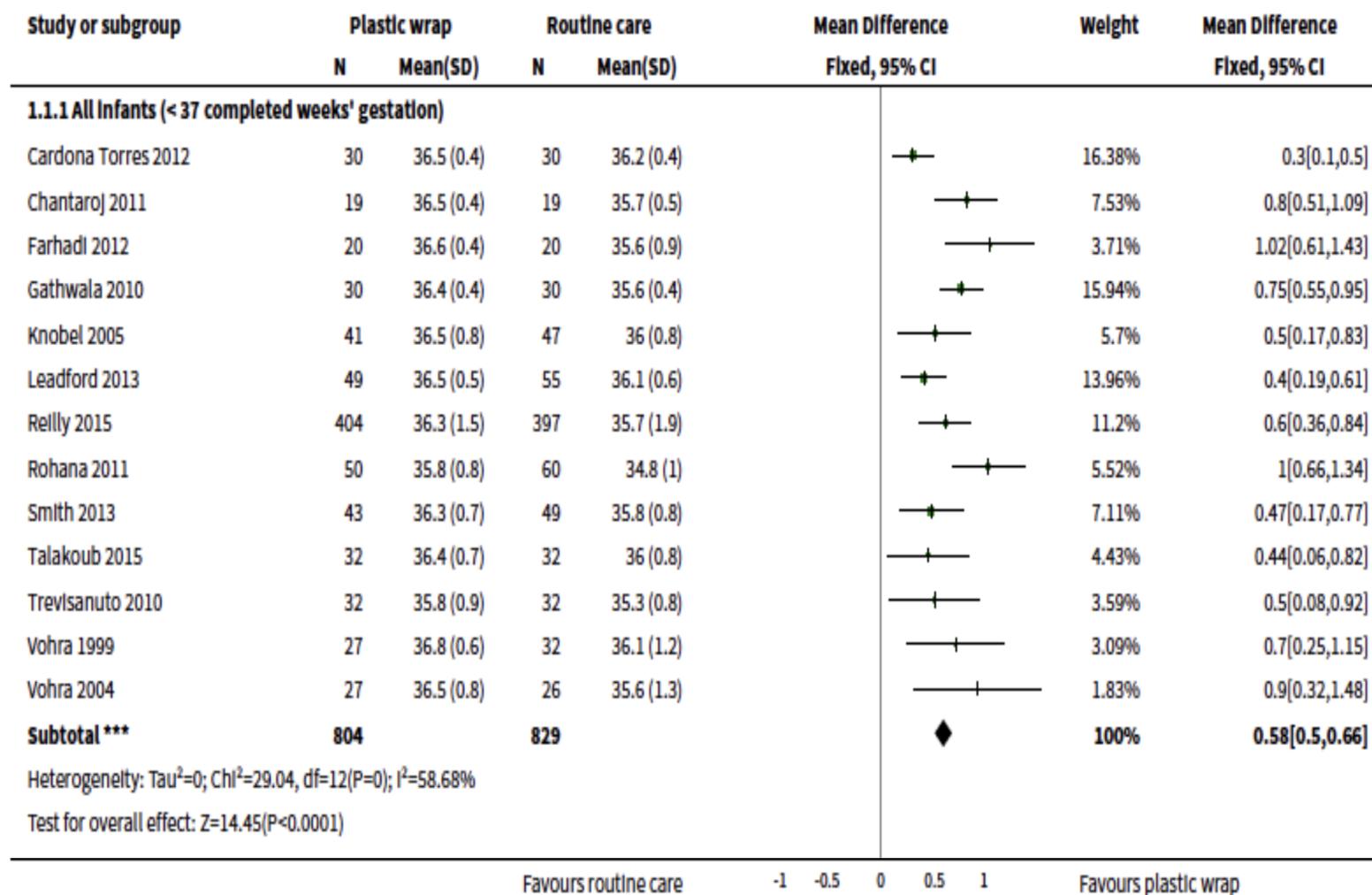


Admission temperature inversely
related to mortality:
28% increase per 1°C

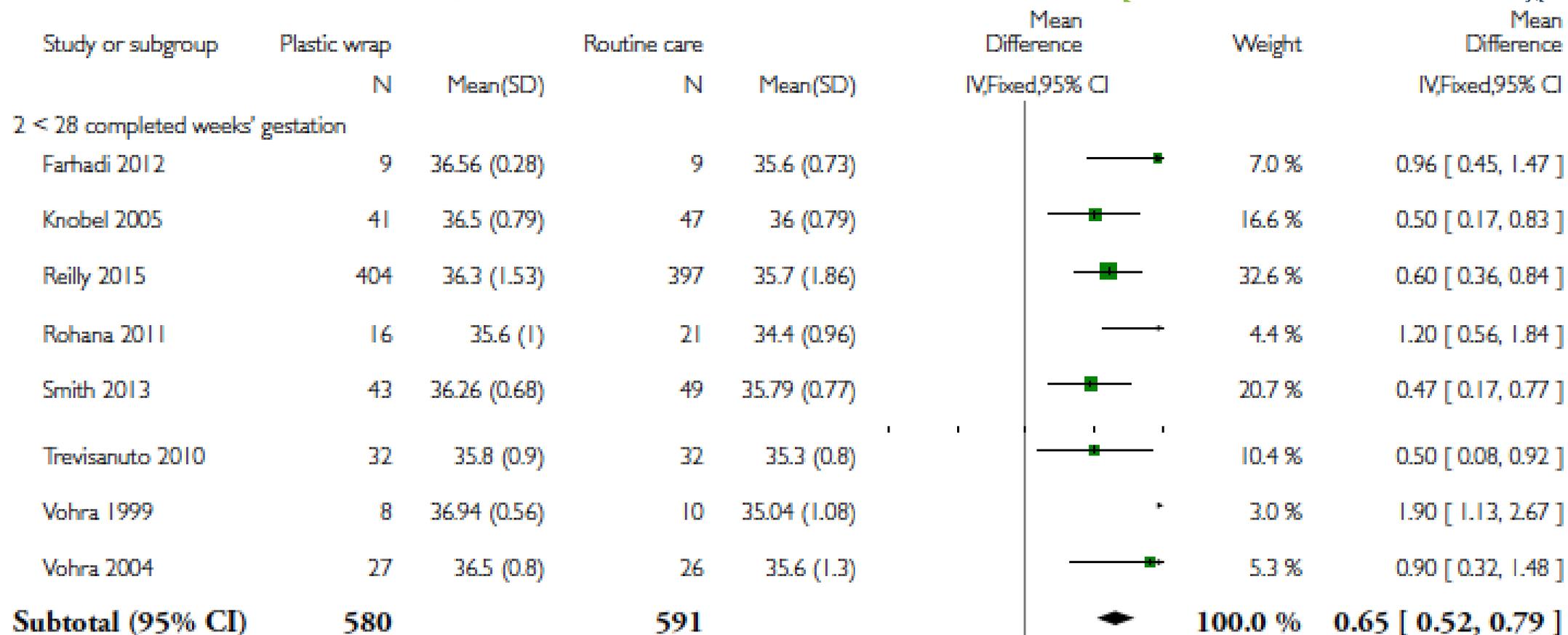


Given that hypothermia impacts infants' outcomes, what are the most evidence based strategies for prevention?

Plastic Wrap in Term Infants



Plastic Wrap in ELBW Infants

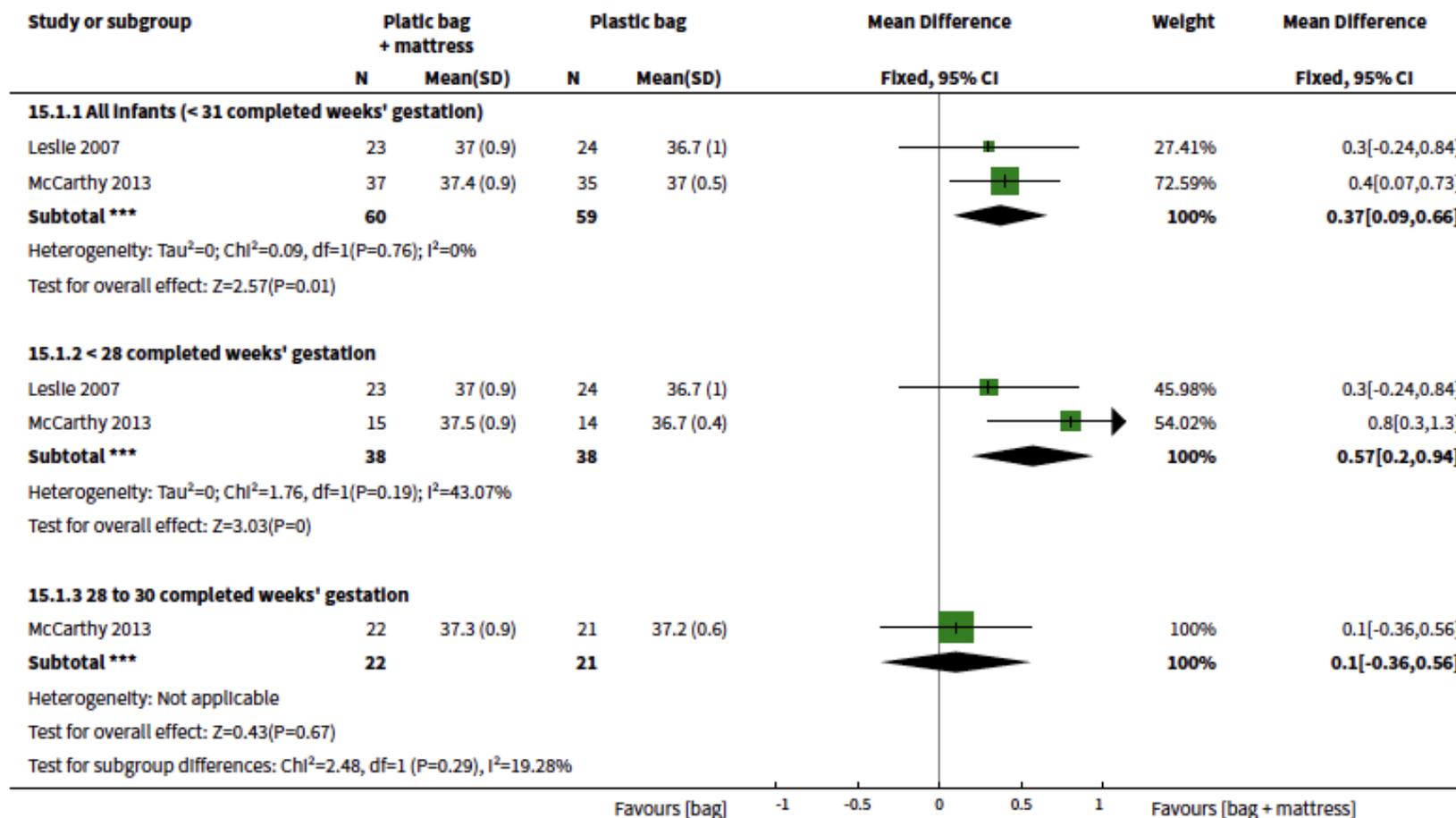


Heterogeneity: $\text{Chi}^2 = 17.86$, $\text{df} = 7$ ($P = 0.01$); $I^2 = 61\%$

Test for overall effect: $Z = 9.50$ ($P < 0.00001$)

3 \geq 28 completed weeks' gestation

Plastic Bag + Mattress: Temp and Mortality





A standardized implementation of multicenter quality improvement program of very low birth weight newborns could significantly reduce admission hypothermia and improve outcomes

Shu-yu Bi¹, Yong-hui Yu^{1,2*}, Cong Li^{3†}, Ping Xu³, Hai-yan Xu^{4†}, Jia-hui Li⁴, Qiong-yu Liu^{5†}, Min Li⁵, Xin-jian Liu^{6†} and Hui Wang⁶

ORIGINAL ARTICLE

Improvement in thermoregulation outcomes following the implementation of a thermoregulation bundle for preterm infants

Tarun S Singh ^{1,2}, Hannah Skelton^{1,3}, Jane Baird¹, Ann-Maree Padernia¹, Rajesh Maheshwari^{1,2}, Dharmesh M Shah^{1,2}, Daphne D'Cruz¹, Melissa Luig¹ and Pranav Jani ^{1,2}

¹Neonatal Intensive Care Unit, Westmead Hospital, ²Faculty of Medicine and Health, University of Sydney and ³School of Nursing and Midwifery, Western Sydney University, Sydney, New South Wales, Australia

RESEARCH ARTICLE

Quality Improvement Approach to Reducing Admission Hypothermia Among Preterm and Term Infants

Alicia Sprecher, MD,² Kathryn Malin, RN, MSN, APNP, PhD,³ Deanna Finley, APNP,³ Paula Lembke, BSN, RN,² Sally Keller, RN,³ Ann Grippe, MSN, RN,³ Genesee Hornung, MSN, RN, CNS, CPNP-PC,³ Nicholas Antos, MD,² Michael Uhing, MD²

DOI: 10.1111/apa.16009

REGULAR ARTICLE

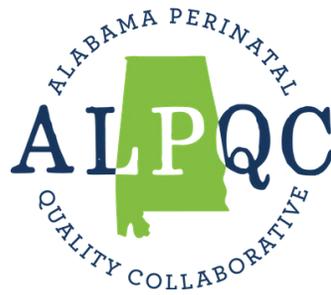


A multimodal quality improvement approach to promote normothermia in very preterm infants

Aneurin Young¹ | Fameesh Azeez² | Santan Pawalu Godad² | Preethish Shetty³ | Alok Sharma²

The Golden Hour: a quality improvement initiative for extremely premature infants in the neonatal intensive care unit

Sarah E. W. Croop^{1,2} · Suzanne M. Thoyre² · Sofia Aliaga¹ · Martin J. McCaffrey¹ · Sigal Peter-Wohl¹



Quality-Improvement Effort to Reduce Hypothermia Among High-Risk Infants on a Mother-Infant Unit

Christine Andrews, MD, MPH,^a Colleen Whatley, MSN, CNS-BC, RNC-OB,^b Meaghan Smith, MSN, RN-BC,^c Emily Caron Brayton, RN, ADN,^b Suzanne Simone, BSN,^b Alison Volpe Holmes, MD, MPH^{a,b}

Reducing Admission Hypothermia in Neonates Born at Less Than 32 Weeks or 1500 g

Milena Frazer, BS-RNC; Amy Ciarlo, BS-RNC; Katherine A. Hinderer, PhD, RN, CCRN-K, CNE; Carrie-ellen Briere, PhD, RN, CLC

A Quality Improvement Intervention to Decrease Hypothermia in the Delivery Room Using a Checklist

Alexandra Vinci, MD, FAAP*†; Shahidul Islam, MPH, PStat®*†; Lyn Quintos-Alegheband, MD*†; Nazeeh Hanna, MD*†; Amrita Nayak, MD*†

Perinatal quality improvement bundle to decrease hypothermia in extremely low birthweight infants with birth weight less than 1000 g: single-center experience over 6 years

Dilip R Bhatt,¹ Nirupa Reddy,¹ Reynaldo Ruiz,² Darla V Bustos,³ Torria Peacock,¹ Roman-Angelo Dizon,¹ Sunjeeve Weerasinghe,¹ David X Braun,¹ Rangasamy Ramanathan ⁴



REDCap Data Entry



REDCap Access

- More than 1 person with access to survey is recommended in case of inability of primary person to enter data
 - REDCap only allows us to input one person, but you may send survey to additional people on your team
- Baseline Data form link sent by email
- Reminder email several days before close
 - Baseline due: March 31, 2024
- Issues, change in users, or need to change your response?
 - Email: info@alpqc.org

REDCap Data Entry – Levels 1 and 2



AAA

NHP Monthly Data

Please complete the survey below of UAB Women & Infants Center.

Thank you!

Please select the reporting period for which you are entering data.

1. Reporting period

Year	Month
2023	December

Outcome Measure

O1a. Total number of newborns delivered during December 2023:

* must provide value

Process Measures - Vaginal Delivery

Monthly, randomly sample* from the birth admission of 10 newborns delivered vaginally and 10 newborns delivered by cesarean section. Do not include PHI.

*See "How to use random number Generator" document under the "Data Resources" menu at www.alpqc.org/initiatives/nhp

Total number of newborns delivered **vaginally** at 232 weeks' gestation

You should report a random sample of 10 patients, however, if you

Vaginal Birth - Patient #1

P1. Patient Race/Ethnicity

Please select all that apply:

* must provide value

<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Multi Racial
<input type="checkbox"/> Native American	<input type="checkbox"/> Native Hawaiian/Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Other
<input type="checkbox"/> Race Not Reported	<input type="checkbox"/> Unknown

P2a. Gestational Age - Weeks

What was the gestation age of the infant in weeks? (e.g. 31 weeks)

* must provide value

P2b. Gestational Age - Days

What was the gestation age of the infant in days? (e.g. 5 days)

* must provide value

P3. Birth Weight

What was the infant's birth weight in grams?

* must provide value

O2. Temperature on Admission

What was the infant's temperature (in Celsius) on admission to either the NICU or Mother/Baby Unit? (rounded to 1 decimal place)

* must provide value

REDCap Data Entry – Levels 3 and 4



AAA
+ -

NHP Monthly Data

Please complete the survey below of UAB Women & Infants Center.

Thank you!

Please select the reporting period for which you are entering data.

1. Reporting period

Year	Month
2023 ▾	December ▾

Outcome Measure

O1b. Total number of newborns delivered at less than 32 weeks during December 2023:

* must provide value

Process Measures

Monthly, randomly sample* from the birth admission of 15 newborns. Do not include PHI.

*See "How to use random number Generator" document under the "Data Resources" menu at www.alpqc.org/initiatives/nhp

Total number of newborns delivered less than 32 weeks during December 2023

You should report a random sample of 15 patients, however, if you have fewer than 15, please indicate the number of patients being

Patient #1

P1. Patient Race/Ethnicity

Please select all that apply:
* must provide value

<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Multi Racial
<input type="checkbox"/> Native American	<input type="checkbox"/> Native Hawaiian/Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Other
<input type="checkbox"/> Race Not Reported	<input type="checkbox"/> Unknown

P2a. Gestational Age - Weeks

What was the gestation age of the infant in weeks? (e.g. 31 weeks)
* must provide value

P2b. Gestational Age - Days

What was the gestation age of the infant in days? (e.g. 5 days)
* must provide value

P3. Birth Weight

What was the infant's birth weight in grams?
* must provide value

P4. Mode of delivery

Vaginal or cesarean section
* must provide value

<input type="checkbox"/> Vaginal
<input type="checkbox"/> Cesarean section
<input type="checkbox"/> Unknown

REDCap Data Entry – Levels 3 and 4 (continued)

O2. Temperature on Admission What was the infant's temperature (in Celsius) on admission to either the NICU or Mother/Baby Unit? (rounded to 1 decimal place) <i>* must provide value</i>	<input type="text"/>
O3. Delayed cord clamping (DCC): Did the mother receive either: <ul style="list-style-type: none">• If non-vigorous, 30 sec of DCC.• If vigorous, 60 sec of DCC. <i>* must provide value</i>	<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Unknown"/> reset
O4. CPAP: Was CPAP used in the delivery room? <i>* must provide value</i>	<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Unknown"/> reset
O5. Intubation Was the infant intubated in the delivery room? <i>* must provide value</i>	<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Unknown"/> reset
O6. Intraventricular Hemorrhage Did the infant experience any Intraventricular Hemorrhage? <i>* must provide value</i>	<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Unknown"/>

REDCap Data Entry Comparison



ALPQC
ALABAMA PERINATAL
QUALITY COLLABORATIVE

Levels 1 & 2

AAA

NHP Monthly Data

Please complete the survey below of UAB Women & Infants Center.

Thank you!

Please select the reporting period for which you are entering data.

1. Reporting period

Year	Month
2023 ▾	December ▾

Outcome Measure

O1a. Total number of newborns delivered during December 2023:

** must provide value*

Process Measures - Vaginal Delivery

Monthly, randomly sample* from the birth admission of 10 newborns delivered vaginally and 10 newborns delivered by cesarean section. Do not include PHI.

**See "How to use random number Generator" document under the "Data Resources" menu at www.alpqc.org/initiatives/nhp*

Total number of newborns delivered **vaginally** at ≥ 32 weeks' gestation

You should report a random sample of 10 patients, however, if you



ALPQC
ALABAMA PERINATAL
QUALITY COLLABORATIVE

Levels 3 & 4

AAA

NHP Monthly Data

Please complete the survey below of UAB Women & Infants Center.

Thank you!

Please select the reporting period for which you are entering data.

1. Reporting period

Year	Month
2023 ▾	December ▾

Outcome Measure

O1b. Total number of newborns delivered at less than 32 weeks during December 2023:

** must provide value*

Process Measures

Monthly, randomly sample* from the birth admission of 15 newborns. Do not include PHI.

**See "How to use random number Generator" document under the "Data Resources" menu at www.alpqc.org/initiatives/nhp*

Total number of newborns delivered less than 32 weeks during December 2023

You should report a random sample of 15 patients, however, if you have fewer than 15, please indicate the number of patients being

Q&A



Please feel free to **unmute** and ask questions

You may also enter comments or questions in the “chat” box



Reminders

- Please enroll in the Neonatal Hypothermia Prevention Initiative if you have not already done so.
 - Enrollment form can be found at www.alpqc.org/nhp
- Remember to register for monthly Action Period Calls via Zoom
 - Action Period calls will take place on the 4th Wednesday of every month at 12pm
- Please register for your monthly 1:1 calls with ALPQC Quality RN
 - Requests went out at the beginning of the month
- Next NOWS Sustainability reporting will be due April 30th for Jan-Mar 2024
 - Please enter your Oct-Dec sustainability data if you have not done so already



NOWS Sustainability Data

October-December 2023



ALPQC NOWS Sustainability Data Dashboard

Measures	Initiative Average (April '22-Oct '23)	Sustainability Phase (Oct-Dec '23)
1 – Referred to addiction services (%yes)	39.29%	38.18%
2 – Narcan Counselling Documented (%yes)	35.53%	40.00%
3 – Days old at Discharge- Length of stay (days)	12.79	12.29
4 – Collaborative Discharge Plan completed (%yes)	89.88%	94.55%

*still missing data from 5 hospitals in the initiative



Stay Connected!



Website:

<http://www.alpqc.org>

Email:

info@alpqc.org

Twitter: @alpqc

<https://twitter.com/alpqc>

Next Meeting



Wednesday, March 27th at 12pm

Thank you!



Thank you for all your hard work!!
We will see you next month!