



# Neonatal Initiatives

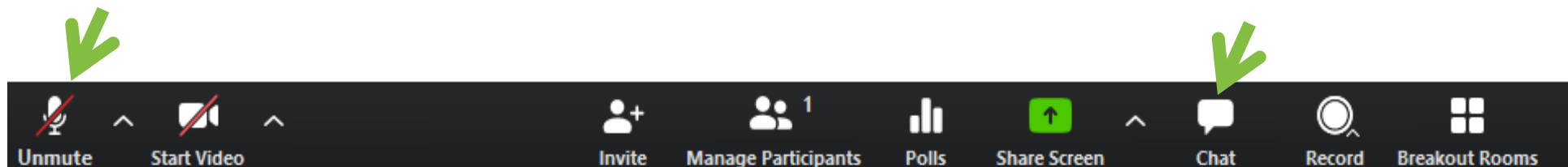
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Action Period Call  
April 24<sup>th</sup>, 2024  
12:00 – 1:00 PM CT

# Welcome

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- 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

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Activity	Time
Welcome, Updates, & Reminders	12:00-12:10
Hospital Poll	12:10-12:15
Baseline Data Review	12:15-12:35
Model for Improvement	12:35-12:50
Q&A	12:50-12:55
Reminders & Next Steps	12:55-1:00



# Updates

# Updates & Reminders

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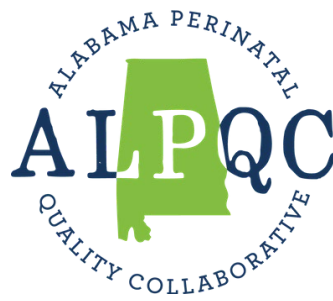
- Monthly (March) *and* Quarterly data (Jan-March) for NHP will be due April 30<sup>th</sup>
  - Links to all surveys sent on April 15<sup>th</sup>
  - Please let us know if you did not receive links and we will send them out ASAP
- Tableau access for teams should be happening soon.
  - If you have not set up an XIAS ID, please reach out to me and we will get one set up
- New Honor Roll Program starting in July

# Quarterly Structural Measures- Levels 1 and 2



Structure Measures
<p><b>S1. Unit Normothermia Policies &amp; Procedures</b> Does your hospital have neonatal hypothermia prevention policies and procedures (reviewed and updated in the last 2 years) that contain the following?</p> <ul style="list-style-type: none"> <li>A. Standardized recommended delivery room temperatures.</li> <li>B. A standardized checklist for delivery care based on estimated gestational age.</li> </ul>
<p><b>S2. Nursing and Provider Education</b> Does your hospital have a programmatic means of educating hospital staff regarding normothermia policies and procedures?</p>
<p><b>S3. Unit Hypothermia Management Policies &amp; Procedures</b> Does your hospital have a policy and procedure for the management of moderate or severe hypothermia inclusive of the following?</p> <ul style="list-style-type: none"> <li>A. Debriefs <u>with the clinical team</u> after moderate to severe neonatal hypothermic events.</li> <li>B. A standardized clinical approach to managing infants with moderate or severe hypothermia.</li> </ul>
<p><b>S4. Reporting of Performance</b> Does your hospital have a means by which hospital performance is shared with both obstetrical and newborn/NICU staff?</p>
<p><u>Note</u> Structure measures reported as: Not started In progress Fully in place</p>

# Quarterly Structural Measures – Levels 3 and 4



Structure Measures (Quarterly)
<p><b>S1. Unit Normothermia Policies &amp; Procedures</b> Does your hospital have neonatal hypothermia prevention policies and procedures (reviewed and updated in the last 2 years) that contain the following?</p> <ul style="list-style-type: none"> <li>A. Standardized recommended delivery room temperatures.</li> <li>B. A standardized checklist for delivery care based on estimated gestational age.</li> </ul>
<p><b>S2. Unit Policies and Procedures for Infants Born at &lt;30 weeks' GA</b> Does your hospital have standard policies related to the following clinical practices?</p> <ul style="list-style-type: none"> <li>A. Eligible patients for delayed cord clamping.</li> <li>B. Guidelines for the use of noninvasive and invasive respiratory support.</li> </ul>
<p><b>S3. Nursing and Provider Education</b> Does your hospital have a programmatic means of educating hospital staff regarding policies and procedures by gestational age?</p>
<p><b>S4. Unit Hypothermia Management Policies &amp; Procedures</b> Does your hospital have a policy and procedure for the management of moderate or severe hypothermia inclusive of the following?</p> <ul style="list-style-type: none"> <li>A. Debriefs <u>with the clinical team</u> after moderate to severe neonatal hypothermic events.</li> <li>B. A standardized clinical approach to managing infants with moderate or severe hypothermia.</li> </ul>
<p><b>S5. Reporting of Performance</b> Does your hospital have a means by which hospital performance is shared with both obstetrical and newborn/NICU staff?</p>
<p><u>Note</u> Structure measures reported as: Not started In progress Fully in place</p>

# ALPQC Quarterly Honor Roll

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We will recognize outstanding hospitals on our first-ever Honor Roll **this July!**

- Hospitals will earn points for each of the following activities:
  - **1 point earned for each activity completed in April, May, & June**
    - Monthly Data Reporting
    - Participation in Monthly Action Period Calls
    - 1-on-1 Monthly Meetings with QI-RN
  - **1 point earned for completing Quarterly Reporting due April 30th**
- **Total of 10 points possible per quarter**
- **Hospitals with  $\geq 9$  points will be recognized on our quarterly Honor Roll**
- **The Honor Roll will be posted on our website and shared with our partners including ALAHA and BCBS.**



Hospitals who have entered 100% of their Monthly AND Quarterly Data for March (as of 04/24/24)	
1. Madison Hospital	9. DCH Northport (x2)
2. Marshall Medical South	10. East Alabama Medical Center
3. Gadsden Regional Medical Center	11. Russell Medical Center
4. DCH Regional (x2)	12. Marshall Medical North
5. USA Children’s & Women’s	13. St. Vincent’s Hospital
6. Medical Center Enterprise	14. Flowers Hospital
7. USA Providence	15. Huntsville Hospital for Women & Children
8. Jackson Hospital	16. UAB (x2)



# Hospital Poll/Breakouts

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# Poll Questions

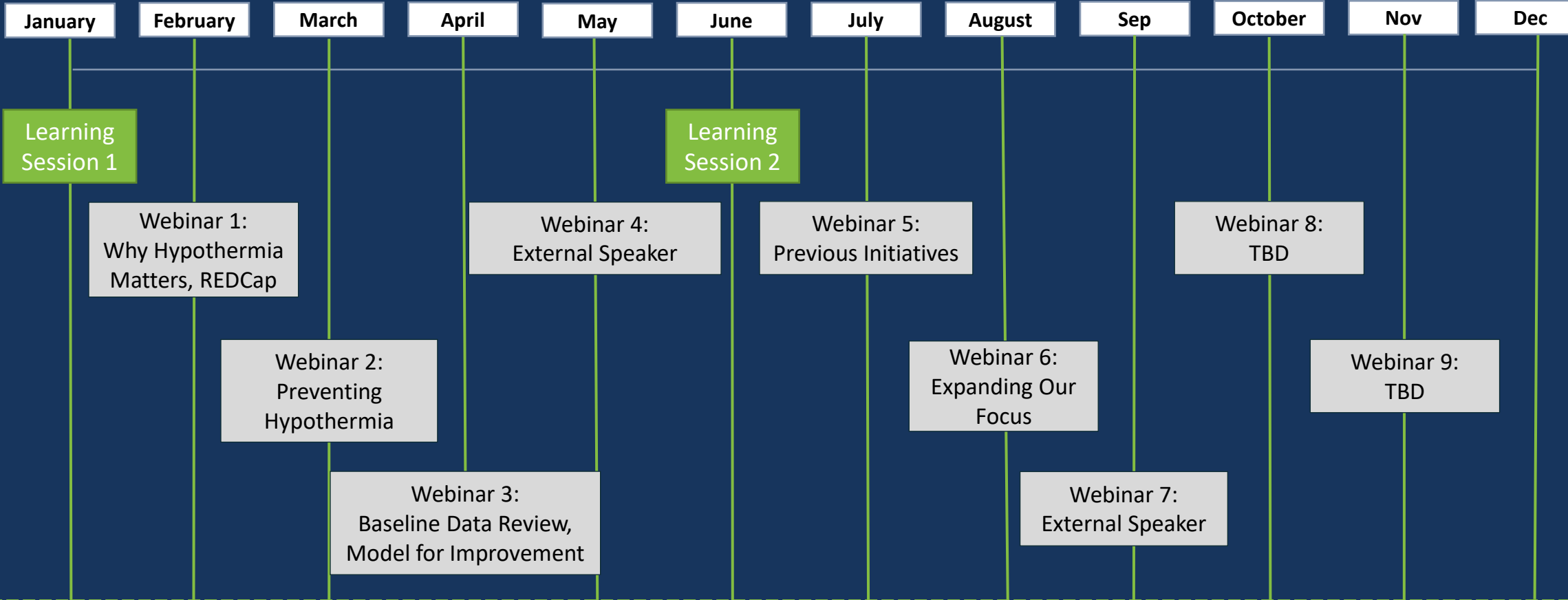
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Which of the following has your team completed?  
(click all that apply)

1. We have entered data
2. We have scheduled recurring team meetings
3. We have decided on where we'd like improve
4. We are currently running PDSAs

2024

Initiative  
Agenda





# Baseline Data Review Levels 1 and 2

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# ALPQC NHP

(From December, 2023 to March, 2024)

Hide Filters

## Measure Names

- All-Hospitals
- User Fix HospThermia 02 Co..

Hospital No Hospital

Race All

Birth Wt All

Date All

GA All

Levels All

Hospitals All

## Navigation Tabs

Raw Temp

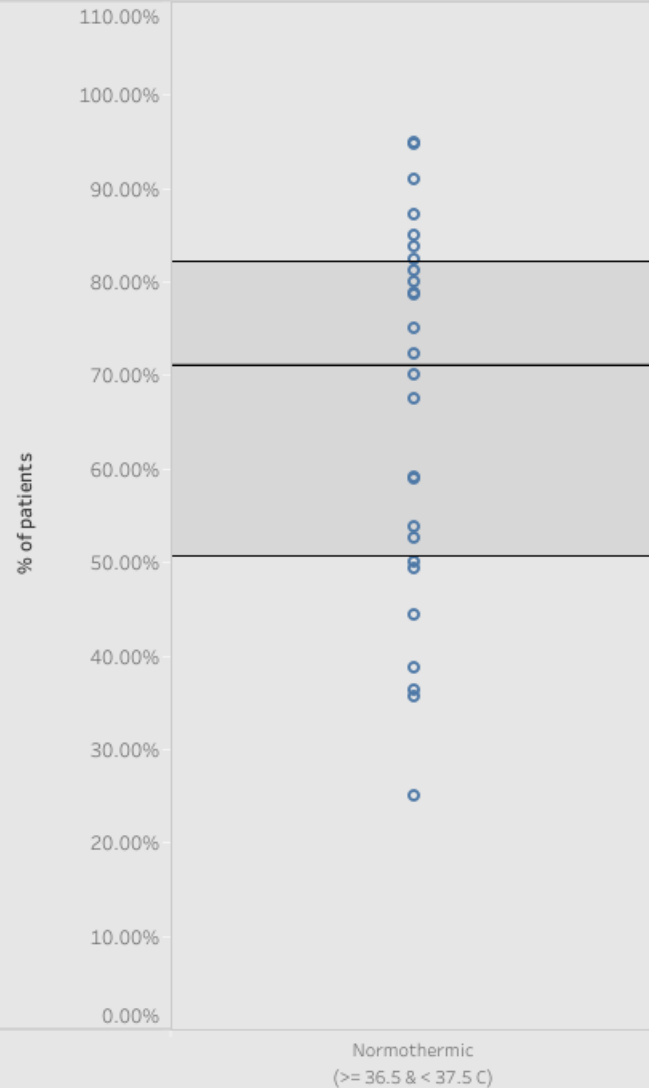
Control Charts

Race/Ethnicity Data

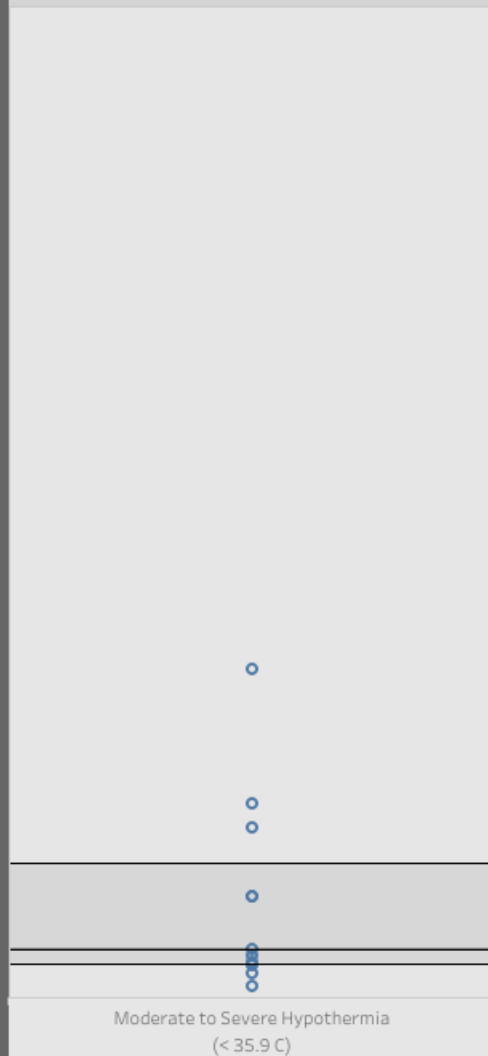
Main Page



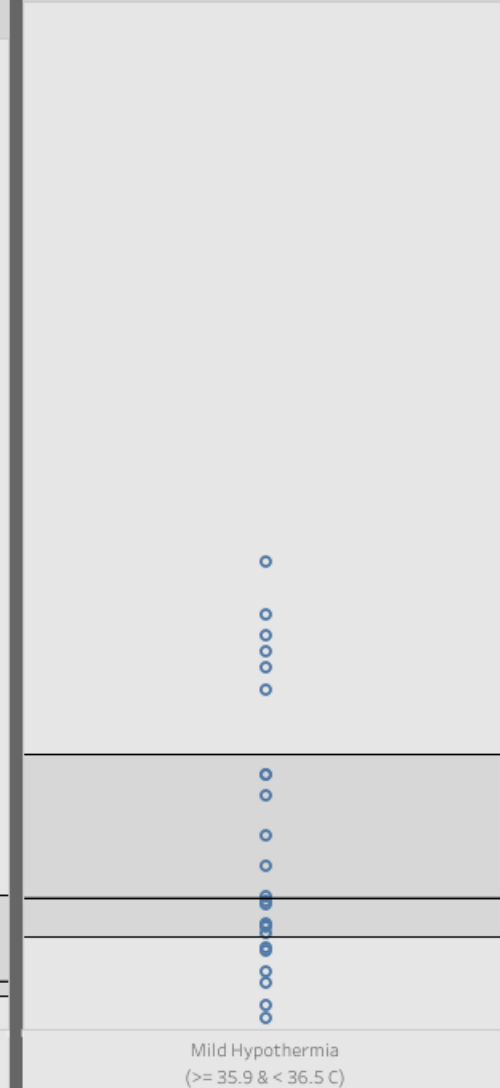
## Normothermic ( $\geq 36.5$ & $< 37.5$ C)



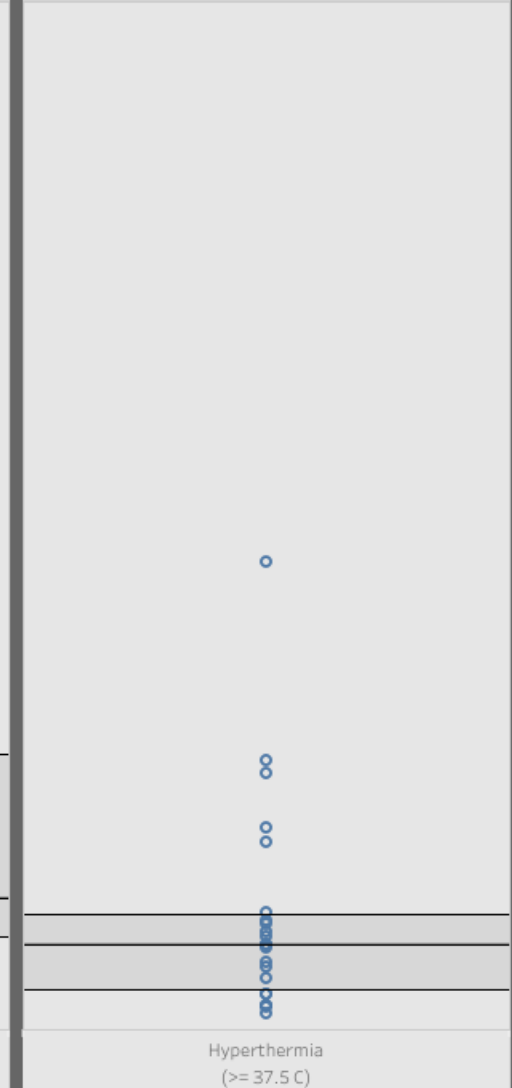
## Moderate to Severe Hypothermia ( $< 35.9$ C)



## Mild Hypothermia ( $\geq 35.9$ & $< 36.5$ C)



## Hyperthermia ( $\geq 37.5$ C)



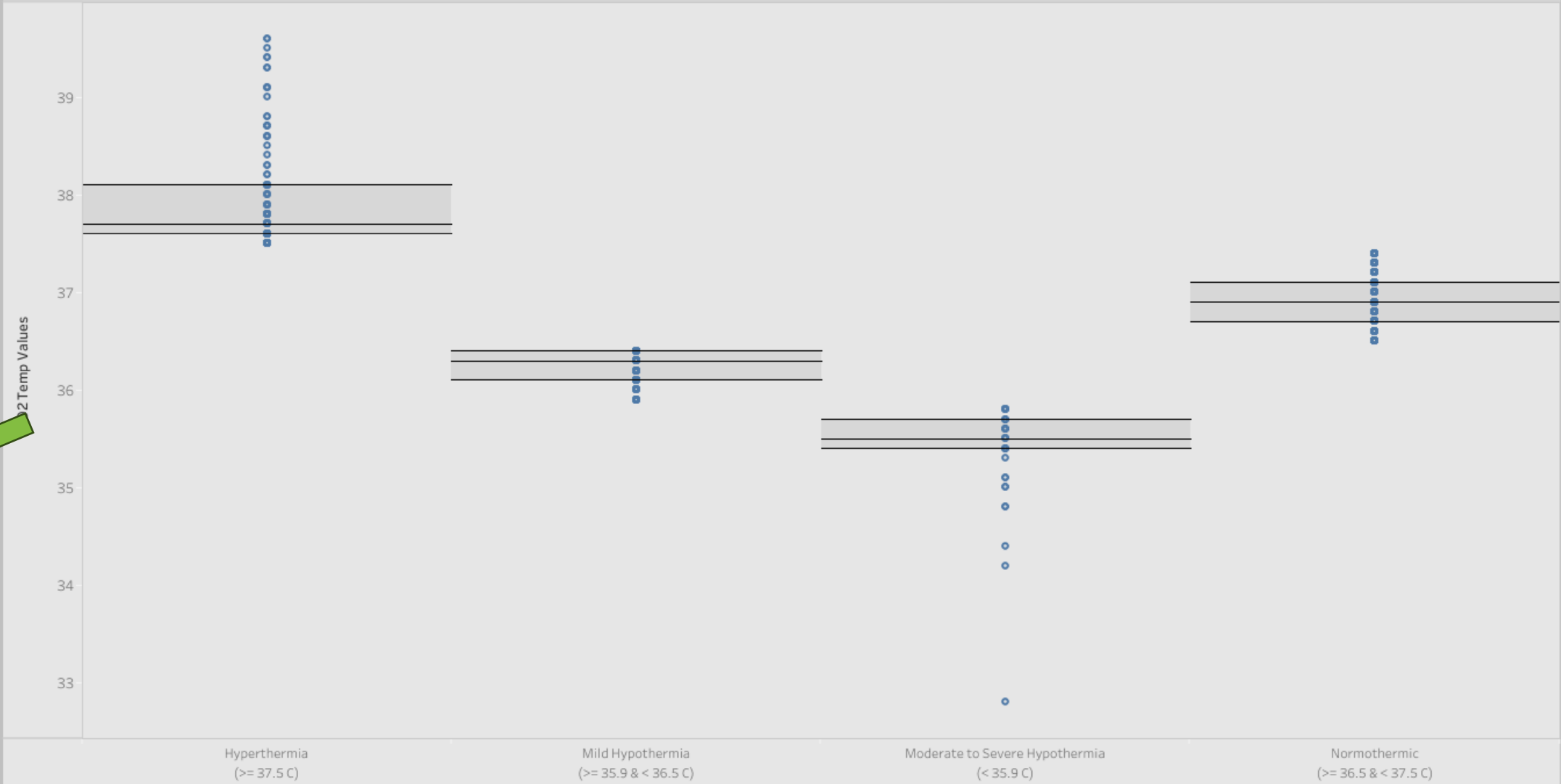
# Prior Initiative Outcomes

Study	Year	Journal	Result
A multimodal quality improvement approach to promote normothermia in very preterm infants	2021	Acta Paediatr	Normothermia increased from 58% to 75%
A quality improvement initiative to reduce hypothermia in a Baby-Friendly nursery – our story of algorithms, K-cards, and Key cards	2021	J Perinatology	Normothermia increased from 79% to 85%
Reducing Admission Hypothermia in Neonates Born at Less Than 32 Weeks or 1500 g	2021	<i>Practice improvements in Neonatal Care</i>	Moderate hypothermia decreased from 10% to 2%
The Golden Hour: a quality improvement initiative for extremely premature infants in the neonatal intensive care unit	2019	J Perinatology	Normothermia increased from 41% to 74%

# ALPQC NHP

(From December, 2023 to March, 2024)

Median/Quartiles of O2 Raw Values of All Hospitals vs Yours



Hide Filters

## Legends

All Hospitals

User O2 Temp Hosp

Hospital No Hospital

Date All

Race All

GA All

Birth Wt All

Levels All

Hospitals All

## Navigation Tabs

Raw Temp

Control Charts

Race/Ethnicity Data

Main Page



# ALPQC NHP

(From December, 2023 to March, 2024)

Hide Filters

## Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital No Hospital

Outcomes Mild Hypothermia

Thermias Mild Hypothermia ..

Race All

Birth Wt All

GA All

Date Multiple values

Your Hospital All

Hospitals All

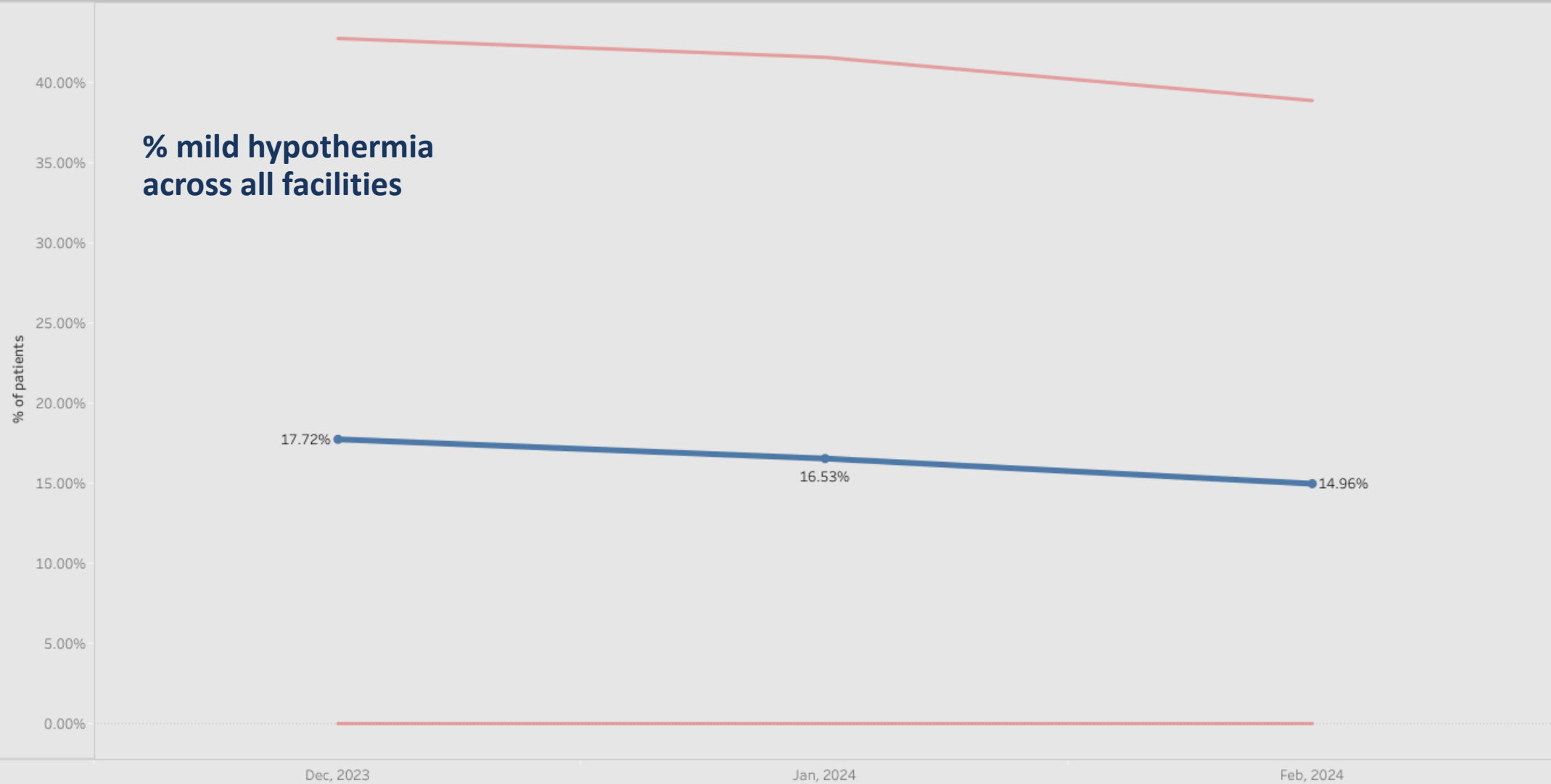
Control Charts

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



# ALPQC NHP

(From December, 2023 to March, 2024)

Hide Filters

## Legends

- Lower Control Limit
- Upper Control Limit
- Your Hospital
- All Hospitals

Hospital No Hospital  
Outcomes Mod-Sev Hypother..  
Thermias Moderate to Sever..  
Race All  
Birth Wt All  
GA All  
Date Multiple values  
Your Hospital All  
Hospitals All

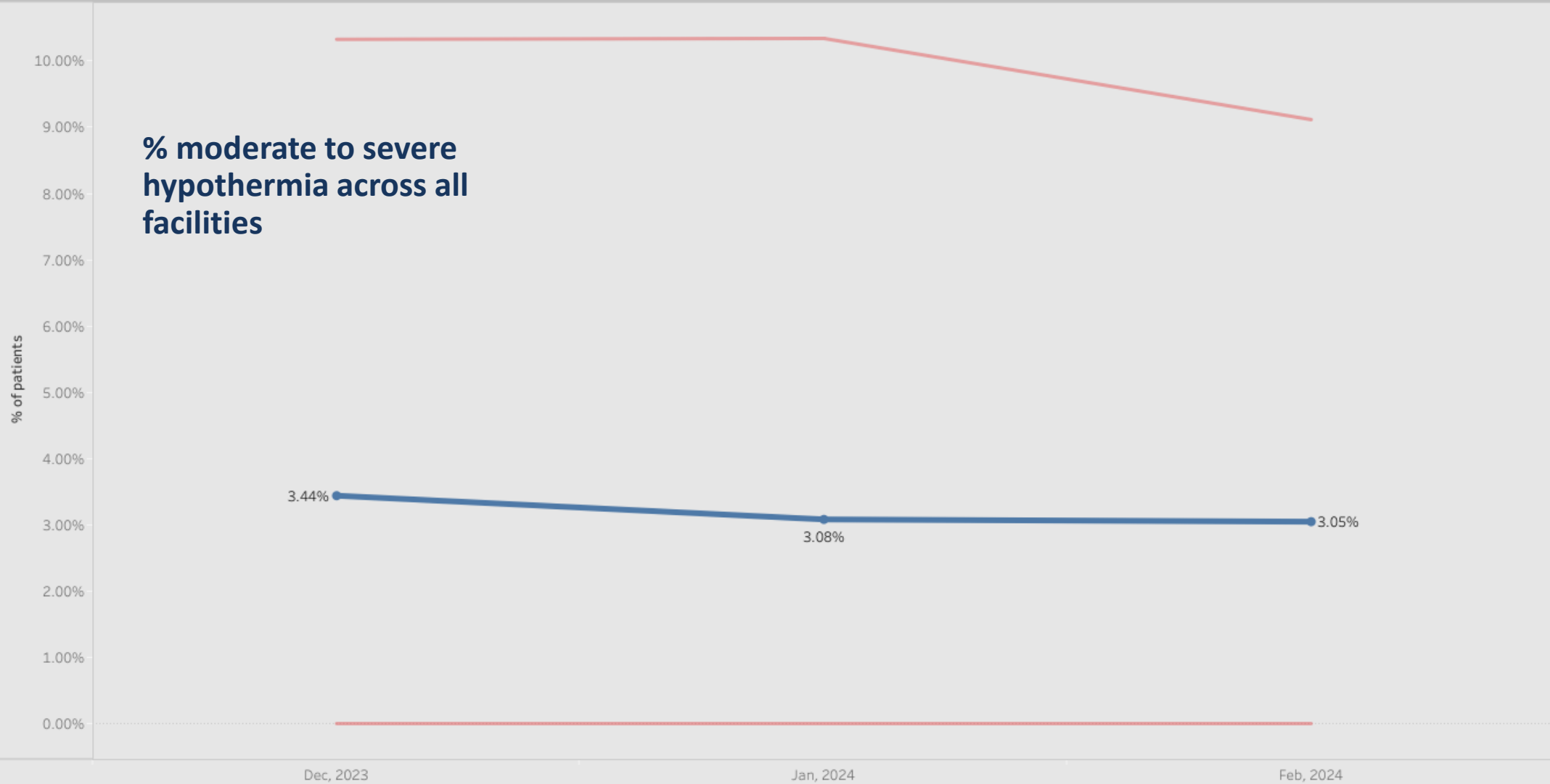
Control Charts

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



# ALPQC NHP

(From December, 2023 to March, 2024)

Hide Filters

## Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital No Hospital

Outcomes Hyperthermia

Thermias Hyperthermia (>= ..

Race All

Birth Wt All

GA All

Date Multiple values

Your Hospital All

Hospitals All

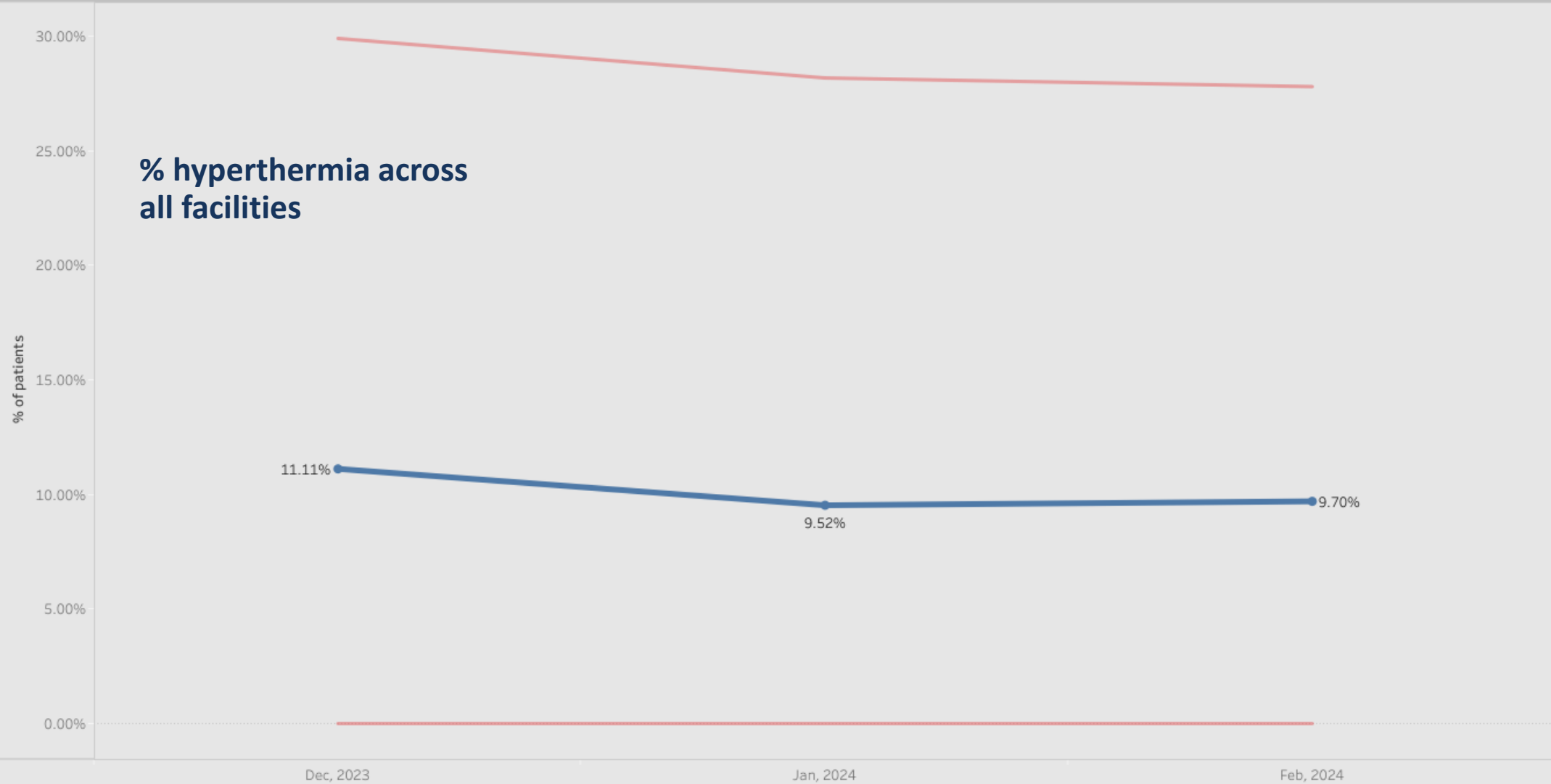
Control Charts

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



[Revert Filters](#)[Hide Filters](#)

## Thermias Legends

- Normothermic ( $\geq 36.5$  ...)
- Mild Hypothermia ( $\geq 3$ ...
- Hyperthermia ( $\geq 37.5$  C)
- Moderate to Severe Hyp...

Hospital

Thermias

Race

Date

GA

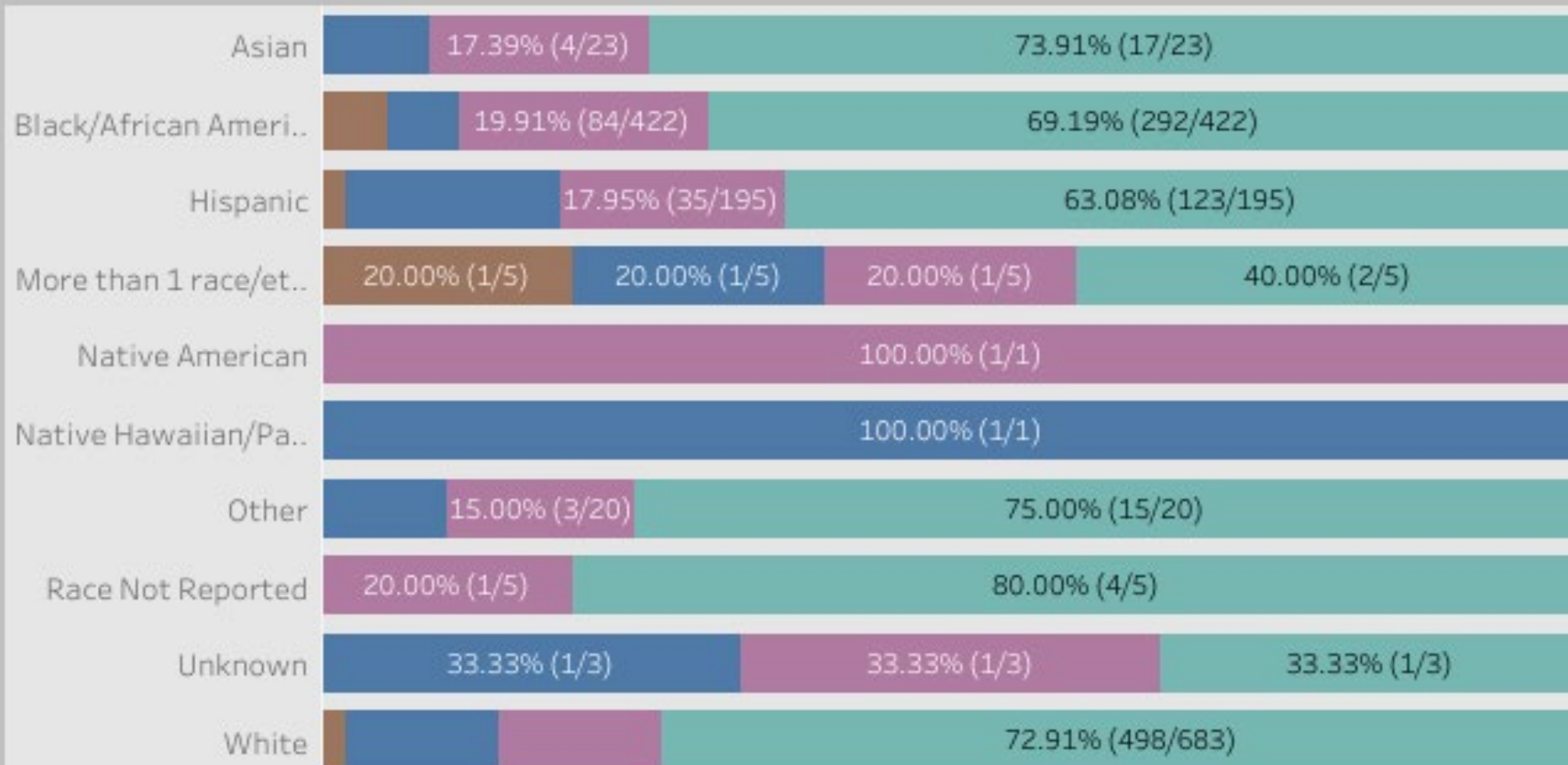
Birth Wt

Levels

Hospitals

[Race/Ethnicity Data](#)[Main Page](#)

## All Hospitals: Race O2 Thermia Counts %



Races

Unknown

More than 1 race/ethnicity

Race Not Reported

Races

Asian

Hispanic

Black/African American

White

Hospital

No Hospital

Thermias

(Multiple values)

Race

(All)

Date

(All)

GA

(All)

Birth Wt

(All)

Levels

(All)

Hospitals

(All)

Race/Ethnicity Data

Main Page

ALABAMA PERINATAL  
AI PQC  
QUALITY COLLABORATIVE

All Hospitals: O2 Thermia Race Counts %

Temperature Category	White	Black/African American	Hispanic	Unknown
Hyperthermia	56.16% (82/146)	16.44% (24/146)	22.60% (33/146)	3.80% (6/146)
Mild Hypothermia	40.64% (89/219)	38.36% (84/219)	15.98% (35/219)	4.02% (9/219)
Mod to Sev Hypothermia	34.15% (14/41)	53.66% (22/41)	12.20% (5/41)	0.00% (0/41)
Normothermic	52.31% (498/952)	30.67% (292/952)	15.13% (144/952)	1.89% (18/952)



# Baseline Data Review Levels 3 and 4

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## ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

## Legends

■ All Hospitals

■ User Fix Hosp04CPAP 02 Co..

Hospital	No Hospital
1	1
2	1
3	1
4	1
5	1
6	1
7	1
8	1
9	1
10	1
11	1
12	1
13	1
14	1
15	1
16	1
17	1
18	1
19	1
20	1
21	1
22	1
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88	1
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90	1
91	1
92	1
93	1
94	1
95	1
96	1
97	1
98	1
99	1
100	1

Date All

Race All

Birth Wt All

	GA	All
Age		
18-24	1.0	1.0
25-34	1.0	1.0
35-44	1.0	1.0
45-54	1.0	1.0
55-64	1.0	1.0
65-74	1.0	1.0
75-84	1.0	1.0
85+	1.0	1.0
Gender		
Male	1.0	1.0
Female	1.0	1.0
Marital status		
Married	1.0	1.0
Single	1.0	1.0
Divorced	1.0	1.0
Widowed	1.0	1.0
Education		
High school or less	1.0	1.0
Some college	1.0	1.0
Bachelor's	1.0	1.0
Master's	1.0	1.0
Doctorate	1.0	1.0
Income		
\$0-\$14,999	1.0	1.0
\$15,000-\$24,999	1.0	1.0
\$25,000-\$34,999	1.0	1.0
\$35,000-\$44,999	1.0	1.0
\$45,000-\$54,999	1.0	1.0
\$55,000-\$64,999	1.0	1.0
\$65,000-\$74,999	1.0	1.0
\$75,000-\$84,999	1.0	1.0
\$85,000-\$94,999	1.0	1.0
\$95,000-\$104,999	1.0	1.0
\$105,000-\$114,999	1.0	1.0
\$115,000-\$124,999	1.0	1.0
\$125,000-\$134,999	1.0	1.0
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\$145,000-\$154,999	1.0	1.0
\$155,000-\$164,999	1.0	1.0
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\$175,000-\$184,999	1.0	1.0
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\$205,000-\$214,999	1.0	1.0
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\$225,000-\$234,999	1.0	1.0
\$235,000-\$244,999	1.0	1.0
\$245,000-\$254,999	1.0	1.0
\$255,000-\$264,999	1.0	1.0
\$265,000-\$274,999	1.0	1.0
\$275,000-\$284,999	1.0	1.0
\$285,000-\$294,999	1.0	1.0
\$295,000-\$304,999	1.0	1.0
\$305,000-\$314,999	1.0	1.0
\$315,000-\$324,999	1.0	1.0
\$325,000-\$334,999	1.0	1.0
\$335,000-\$344,999	1.0	1.0
\$345,000-\$354,999	1.0	1.0
\$355,000-\$364,999	1.0	1.0
\$365,000-\$374,999	1.0	1.0
\$375,000-\$384,999	1.0	1.0
\$385,000-\$394,999	1.0	1.0
\$395,000-\$404,999	1.0	1.0
\$405,000-\$414,999	1.0	1.0
\$415,000-\$424,999	1.0	1.0
\$425,000-\$434,999	1.0	1.0
\$435,000-\$444,999	1.0	1.0
\$445,000-\$454,999	1.0	1.0
\$455,000-\$464,999	1.0	1.0
\$465,000-\$474,999	1.0	1.0
\$475,000-\$484,999	1.0	1.0
\$485,000-\$494,999	1.0	1.0
\$495,000-\$504,999	1.0	1.0
\$505,000-\$514,999	1.0	1.0
\$515,000-\$524,999	1.0	1.0
\$525,000-\$534,999	1.0	1.0
\$535,000-\$544,999	1.0	1.0
\$545,000-\$554,999	1.0	1.0
\$555,000-\$564,999	1.0	1.0
\$565,000-\$574,999	1.0	1.0
\$575,000-\$584,999	1.0	1.0
\$585,000-\$594,999	1.0	1.0
\$595,000-\$604,999	1.0	1.0
\$605,000-\$614,999	1.0	1.0
\$615,000-\$624,999	1.0	1.0
\$625,000-\$634,999	1.0	1.0
\$635,000-\$644,999	1.0	1.0
\$645,000-\$654,999	1.0	1.0
\$655,000-\$664,999	1.0	1.0
\$665,000-\$674,999	1.0	1.0
\$675,000-\$684,999	1.0	1.0
\$685,000-\$694,999	1.0	1.0
\$695,000-\$704,999	1.0	1.0
\$705,000-\$714,999	1.0	1.0
\$715,000-\$724,999	1.0	1.0

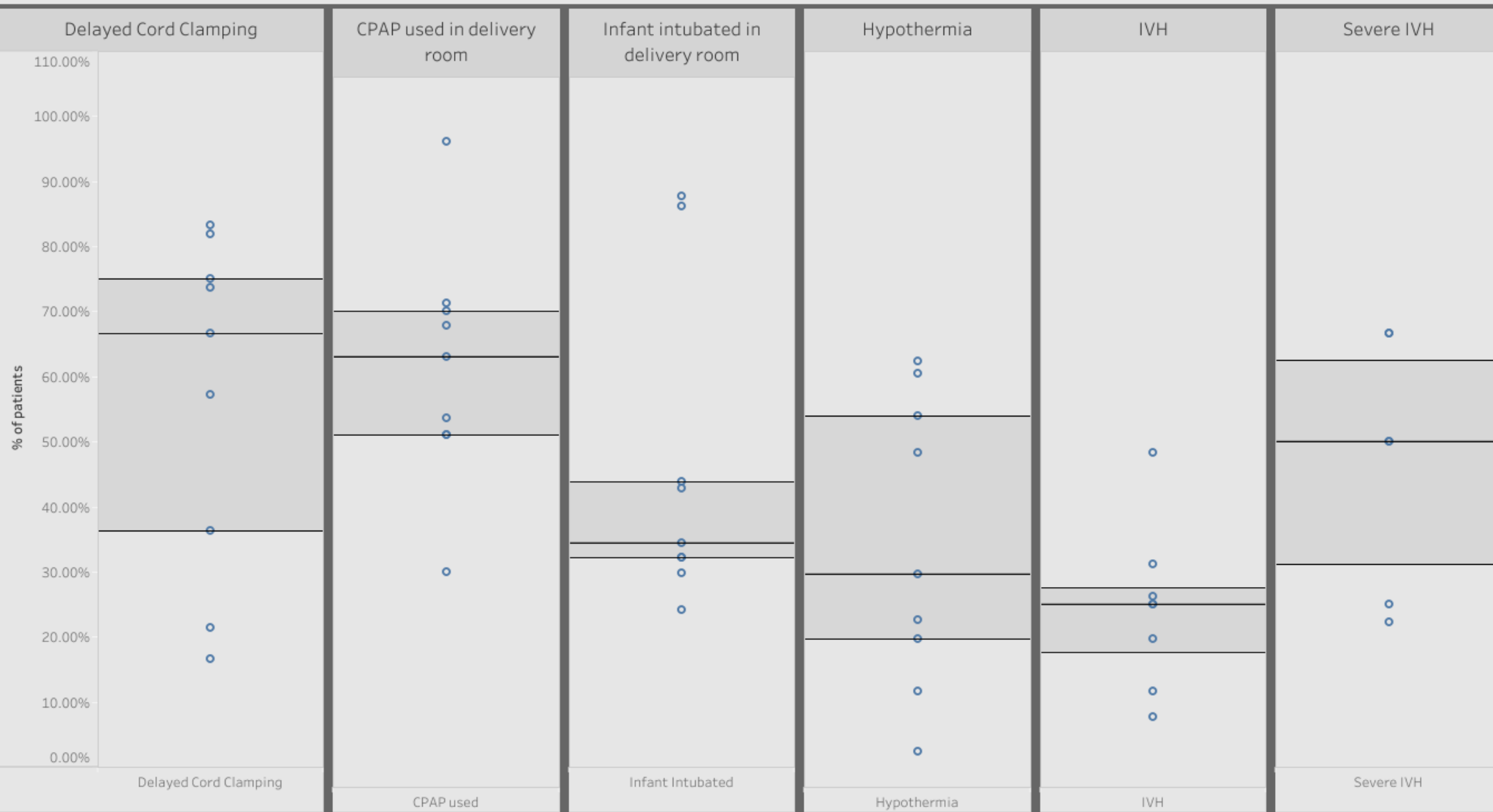
Hospitals All

Temp page

## Control Charts

## Race/Ethnicity Data

[Main Page](#)



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

- Lower Control Limit
- Upper Control Limit
- Your Hospital

All Hospitals

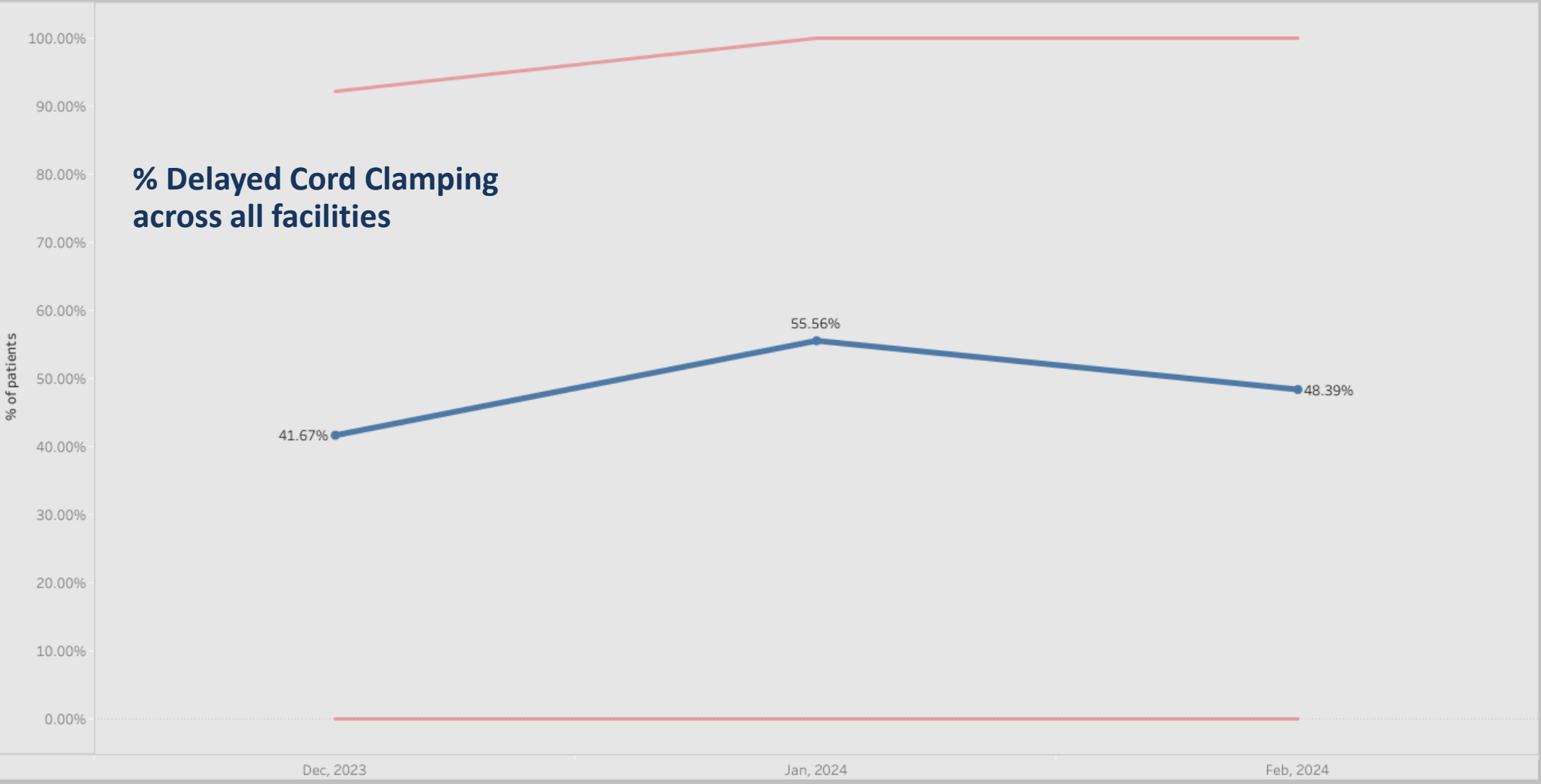
Hospital: No Hospital  
Outcomes: 03. DCC  
Thermias: All  
Race: All  
Birth Wt: All  
GA: All  
Date: Multiple values  
Your Hospital: All  
Hospitals: All

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

- Legends
- Lower Control Limit
  - Upper Control Limit
  - Your Hospital

All Hospitals

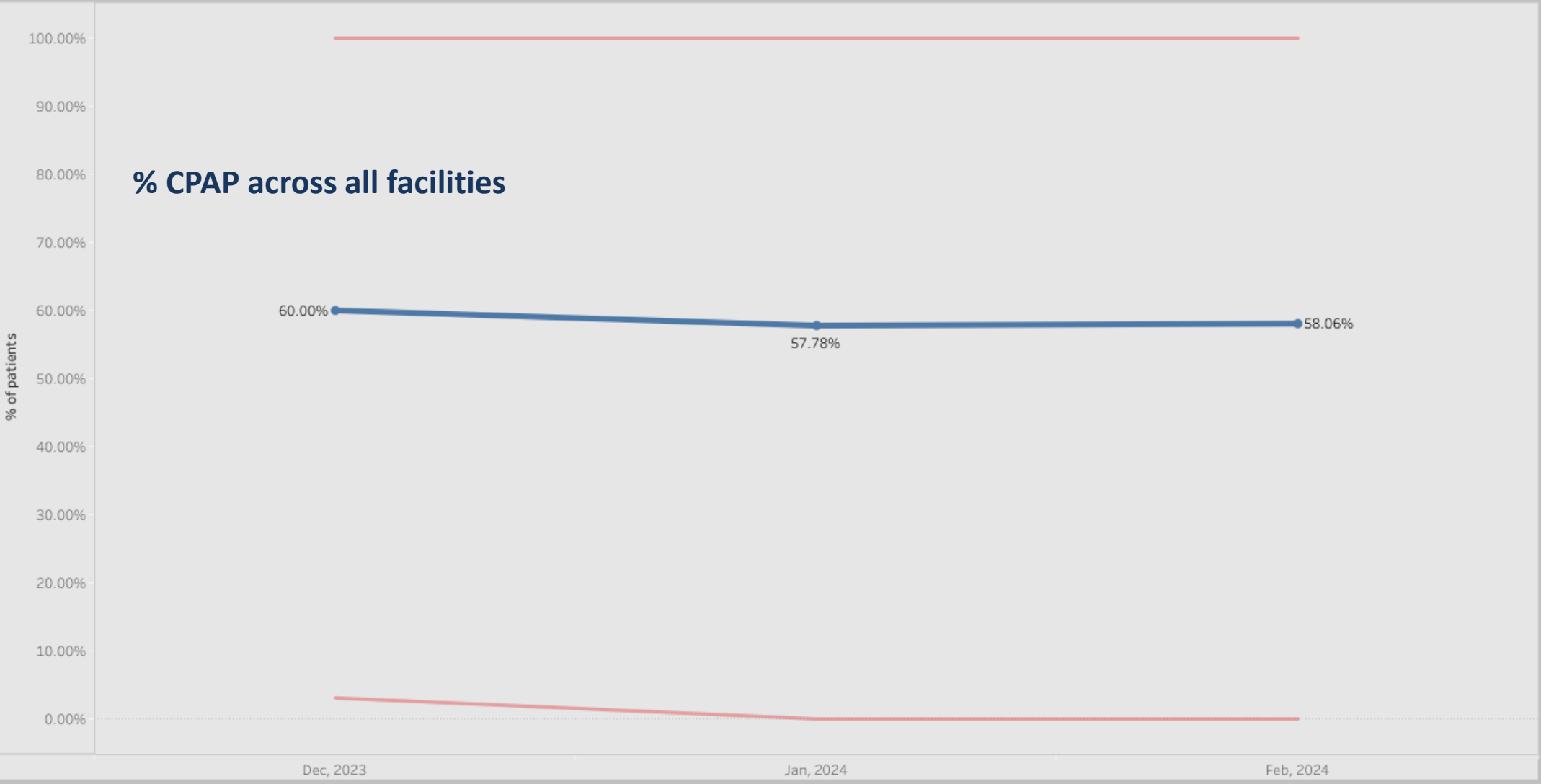
- Hospital No Hospital
- Outcomes O4: CPAP
- Thermias All
- Race All
- Birth Wt All
- GA All
- Date Multiple values
- Your Hospital All
- Hospitals All

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

05. Intubation

Thermias

All

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

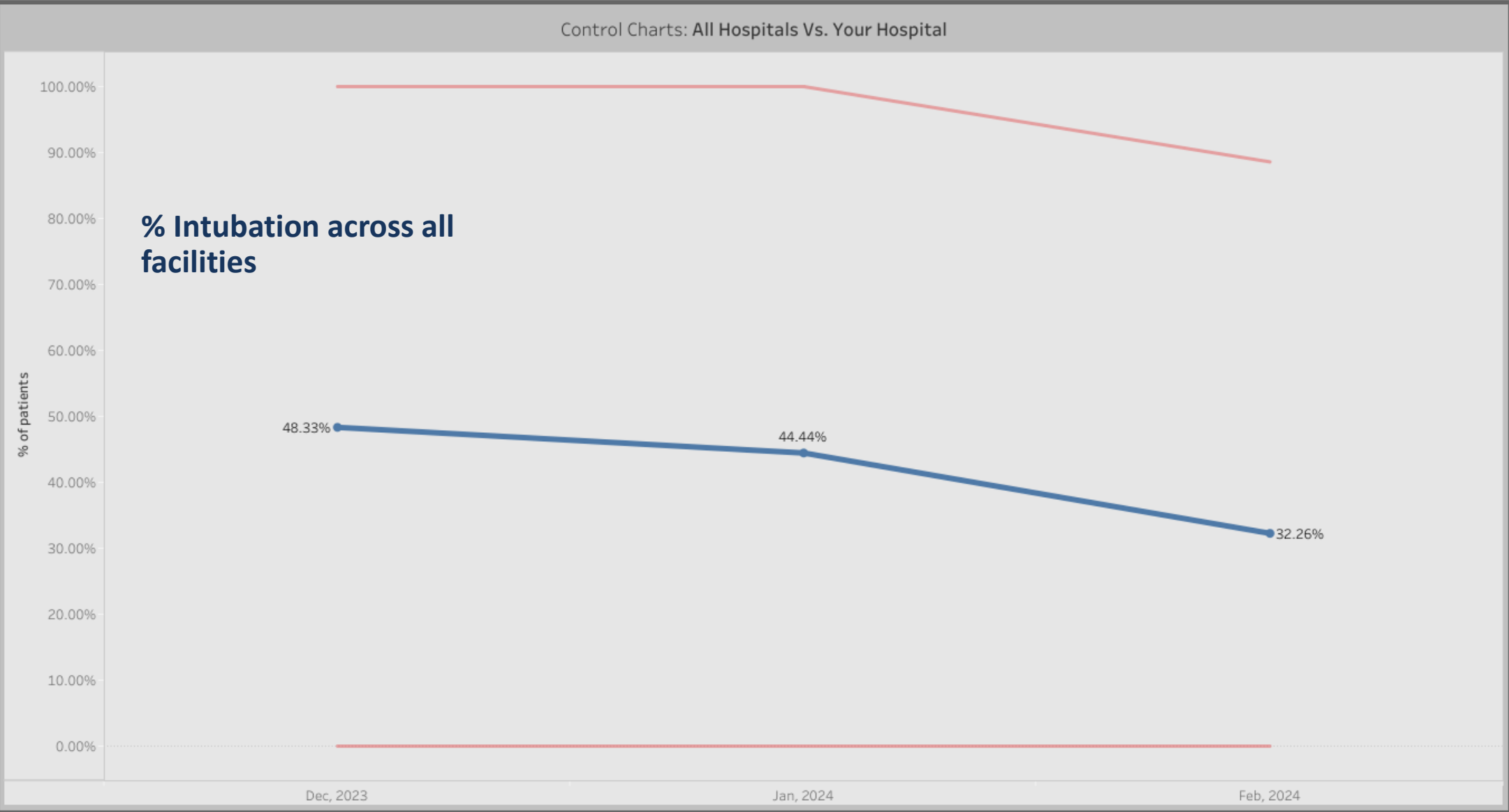
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

ALPQC

QUALITY COLLABORATIVE



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

Any Hypothermia

Thermias

Multiple values

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

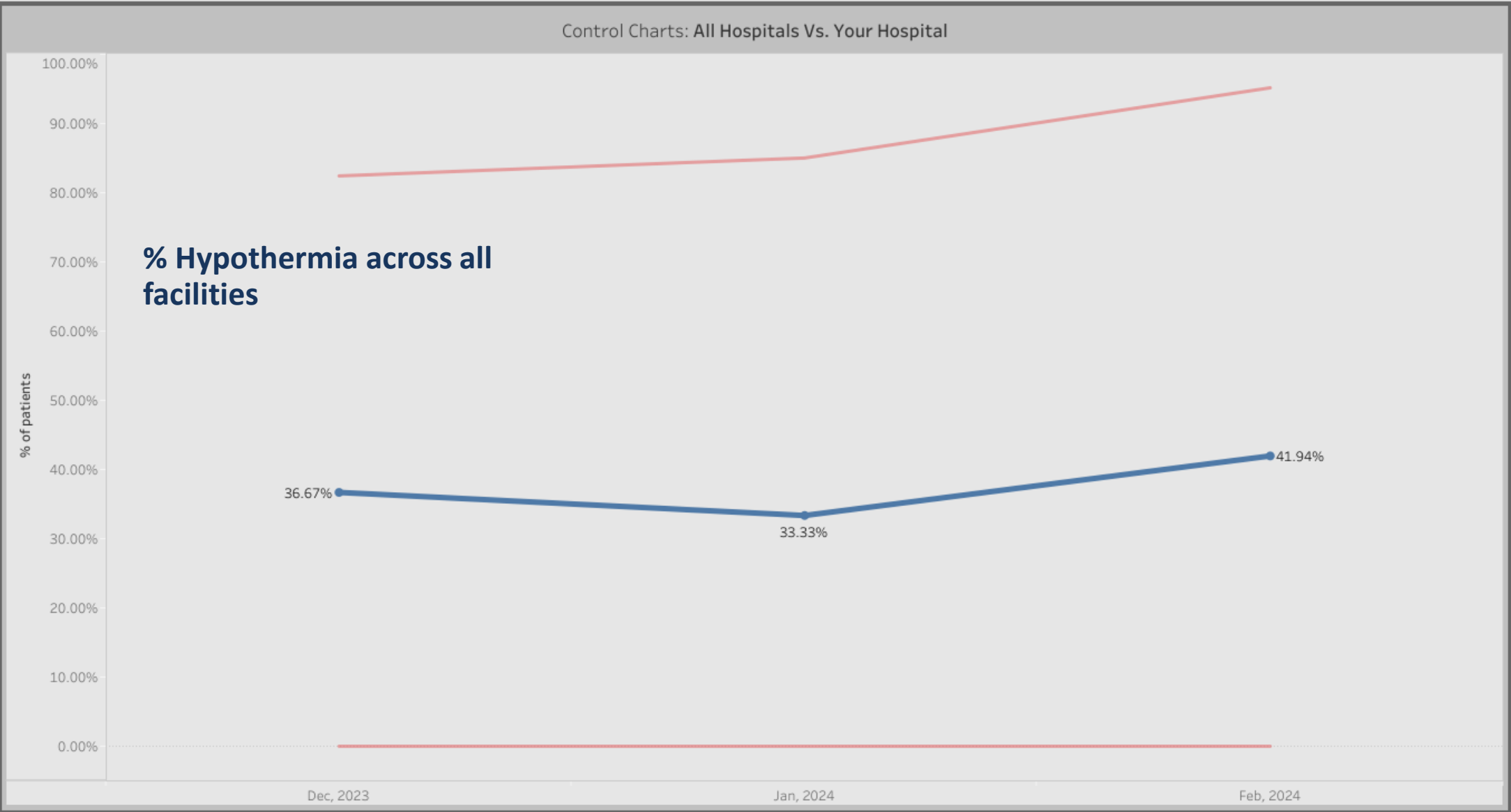
Race/Ethnicity Data

Main Page

ALPQC

ALABAMA PERINATAL

QUALITY COLLABORATIVE



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

O6: IVH

Thermias

All

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

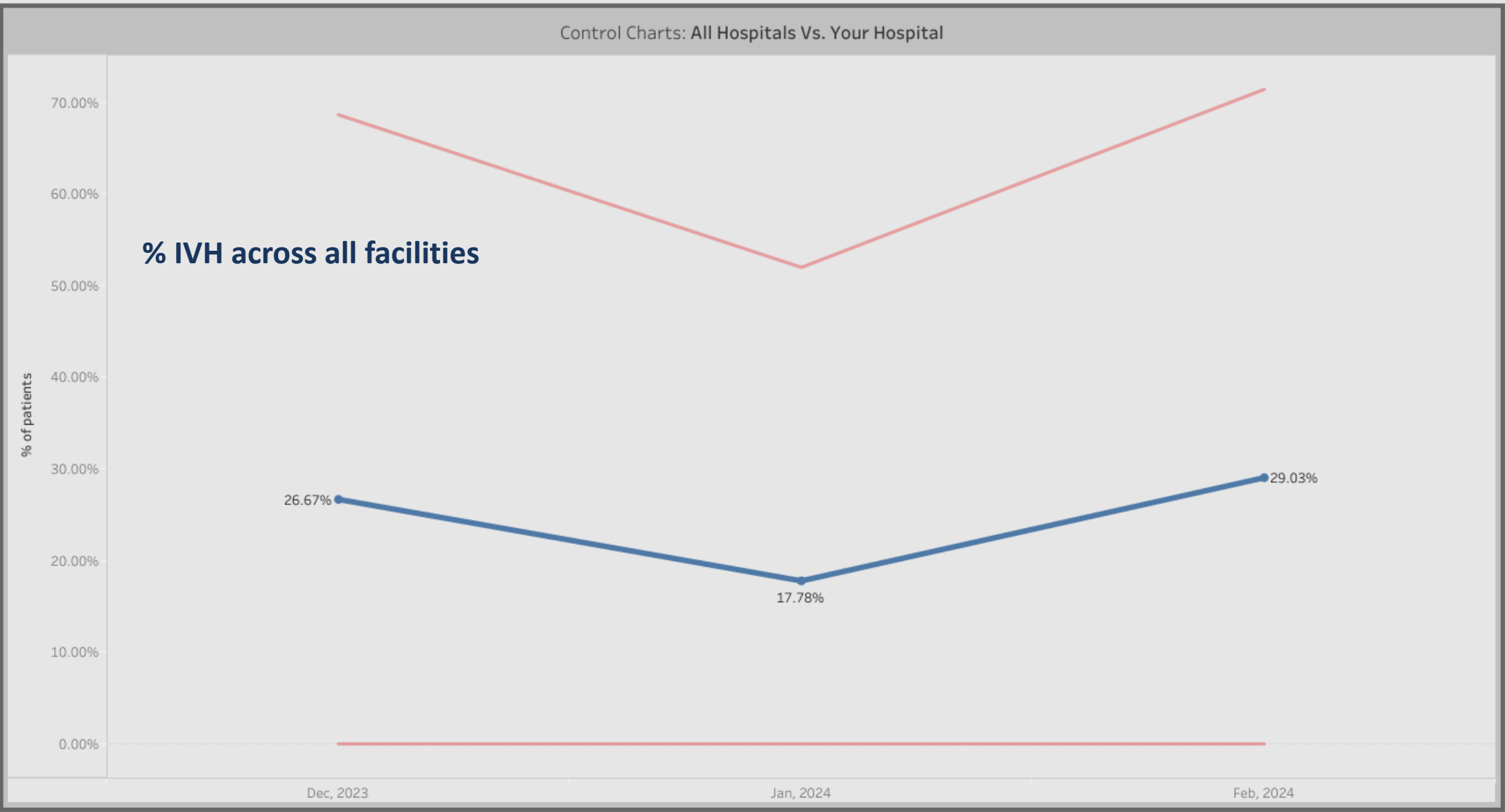
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

ALPQC

QUALITY COLLABORATIVE



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

O6a. IVH Severe

Termias

All

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

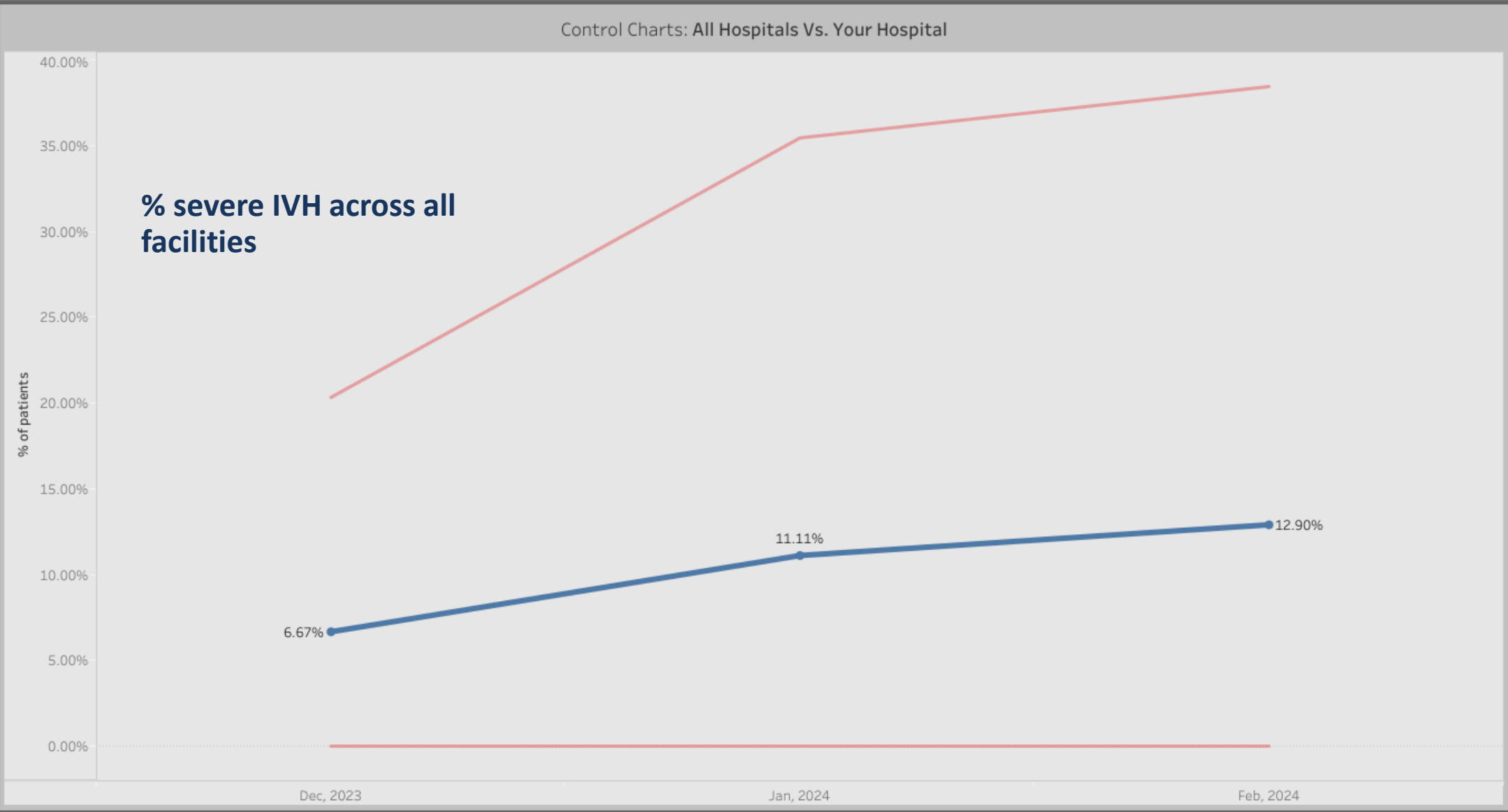
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

ALPQC

QUALITY COLLABORATIVE



## ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

**Hide Filters**

Measure Names

All-Hospitals

User Fix HospThermia O2 Co..

Hospital	No Hospital
----------	-------------

Birth Wt All

	GA	All
Age		
18-24	1.00	1.00
25-34	1.00	1.00
35-44	1.00	1.00
45-54	1.00	1.00
55-64	1.00	1.00
65-74	1.00	1.00
75-84	1.00	1.00
85+	1.00	1.00
Gender		
Male	1.00	1.00
Female	1.00	1.00
Marital status		
Married	1.00	1.00
Single	1.00	1.00
Divorced	1.00	1.00
Widowed	1.00	1.00
Education		
High school or less	1.00	1.00
Some college	1.00	1.00
Bachelor's	1.00	1.00
Master's	1.00	1.00
PhD	1.00	1.00
Income		
\$0-\$14,999	1.00	1.00
\$15,000-\$24,999	1.00	1.00
\$25,000-\$34,999	1.00	1.00
\$35,000-\$44,999	1.00	1.00
\$45,000-\$54,999	1.00	1.00
\$55,000-\$64,999	1.00	1.00
\$65,000-\$74,999	1.00	1.00
\$75,000-\$84,999	1.00	1.00
\$85,000-\$94,999	1.00	1.00
\$95,000-\$104,999	1.00	1.00
\$105,000-\$114,999	1.00	1.00
\$115,000-\$124,999	1.00	1.00
\$125,000-\$134,999	1.00	1.00
\$135,000-\$144,999	1.00	1.00
\$145,000-\$154,999	1.00	1.00
\$155,000-\$164,999	1.00	1.00
\$165,000-\$174,999	1.00	1.00
\$175,000-\$184,999	1.00	1.00
\$185,000-\$194,999	1.00	1.00
\$195,000-\$204,999	1.00	1.00
\$205,000-\$214,999	1.00	1.00
\$215,000-\$224,999	1.00	1.00
\$225,000-\$234,999	1.00	1.00
\$235,000-\$244,999	1.00	1.00
\$245,000-\$254,999	1.00	1.00
\$255,000-\$264,999	1.00	1.00
\$265,000-\$274,999	1.00	1.00
\$275,000-\$284,999	1.00	1.00
\$285,000-\$294,999	1.00	1.00
\$295,000-\$304,999	1.00	1.00
\$305,000-\$314,999	1.00	1.00
\$315,000-\$324,999	1.00	1.00
\$325,000-\$334,999	1.00	1.00
\$335,000-\$344,999	1.00	1.00
\$345,000-\$354,999	1.00	1.00
\$355,000-\$364,999	1.00	1.00
\$365,000-\$374,999	1.00	1.00
\$375,000-\$384,999	1.00	1.00
\$385,000-\$394,999	1.00	1.00
\$395,000-\$404,999	1.00	1.00
\$405,000-\$414,999	1.00	1.00
\$415,000-\$424,999	1.00	1.00
\$425,000-\$434,999	1.00	1.00
\$435,000-\$444,999	1.00	1.00
\$445,000-\$454,999	1.00	1.00
\$455,000-\$464,999	1.00	1.00
\$465,000-\$474,999	1.00	1.00
\$475,000-\$484,999	1.00	1.00
\$485,000-\$494,999	1.00	1.00
\$495,000-\$504,999	1.00	1.00
\$505,000-\$514,999	1.00	1.00
\$515,000-\$524,999	1.00	1.00
\$525,000-\$534,999	1.00	1.00
\$535,000-\$544,999	1.00	1.00
\$545,000-\$554,999	1.00	1.00
\$555,000-\$564,999	1.00	1.00
\$565,000-\$574,999	1.00	1.00
\$575,000-\$584,999	1.00	1.00
\$585,000-\$594,999	1.00	1.00
\$595,000-\$604,999	1.00	1.00
\$605,000-\$614,999	1.00	1.00
\$615,000-\$624,999	1.00	1.00
\$625,000-\$634,999	1.00	1.00
\$635,000-\$644,999	1.00	1.00
\$645,000-\$654,999	1.00	1.00
\$655,000-\$664,999	1.00	1.00
\$665,000-\$674,999	1.00	1.00
\$675,000-\$684,999	1.00	1.00
\$6		

Date All

Race	All
------	-----

Hospitals	All
<b>Number of hospitals</b>	
$\geq 10$	6
$< 10$	7
<b>Total number of patients</b>	
$\geq 100$	8
$< 100$	5
<b>Median age</b>	
$\geq 65$	9
$< 65$	4
<b>Median length of stay</b>	
$\geq 10$	6
$< 10$	8
<b>Median charges</b>	
$\geq \$100,000$	6
$< \$100,000$	7

Temp page

## Control Charts

## Race/Ethnicity Data

[Main Page](#)



Normothermic ( $\geq 36.5$  &  $< 37.5$  C)

Moderate to Severe Hypothermia (< 35.9 C)

Mild Hypothermia ( $\geq 35.9$  &  $< 36.5$  C)

Hyperthermia ( $\geq 37.5$  C)

% of patients

110.00%  
100.00%  
90.00%  
80.00%  
70.00%  
60.00%  
50.00%  
40.00%  
30.00%  
20.00%  
10.00%  
0.00%

Normothermic  
( $\geq 36.5$  &  $< 37.5$  C)

Moderate to Severe Hypothermia  
( $< 35.9^{\circ}\text{C}$ )

Mild Hypothermia  
( $\geq 35.9$  &  $< 36.5$  C)

Hyperthermia  
( $\geq 37.5$  C)

# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

Mild Hypothermia

Thermias

Mild Hypothermia ..

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

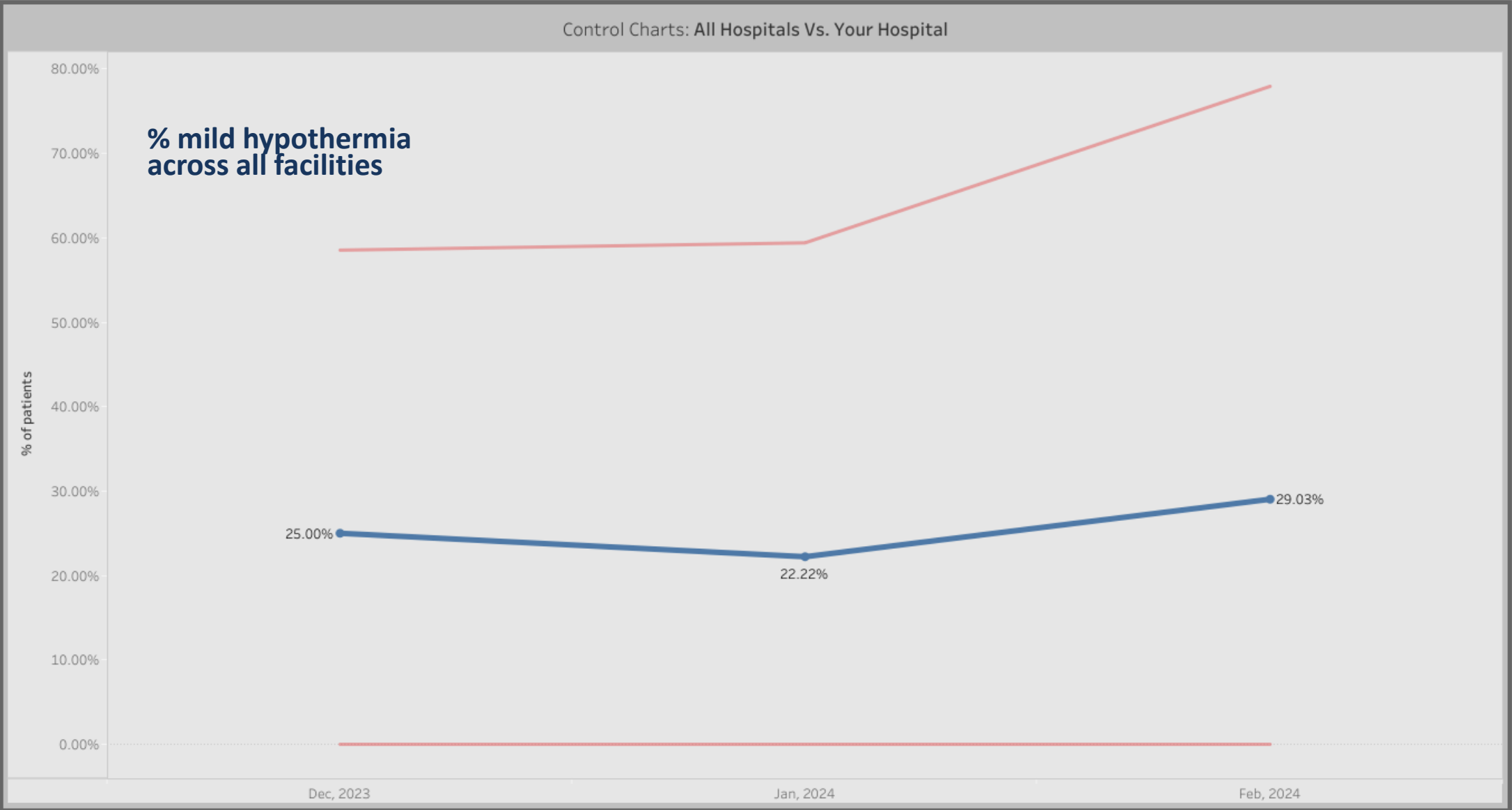
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

ALPQC

QUALITY COLLABORATIVE



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

Legends

Lower Control Limit

Upper Control Limit

Your Hospital

All Hospitals

Hospital

No Hospital

Outcomes

Mod-Sev Hypother..

Thermias

Moderate to Sever..

Race

All

Birth Wt

All

GA

All

Date

Multiple values

Your Hospital

All

Hospitals

All

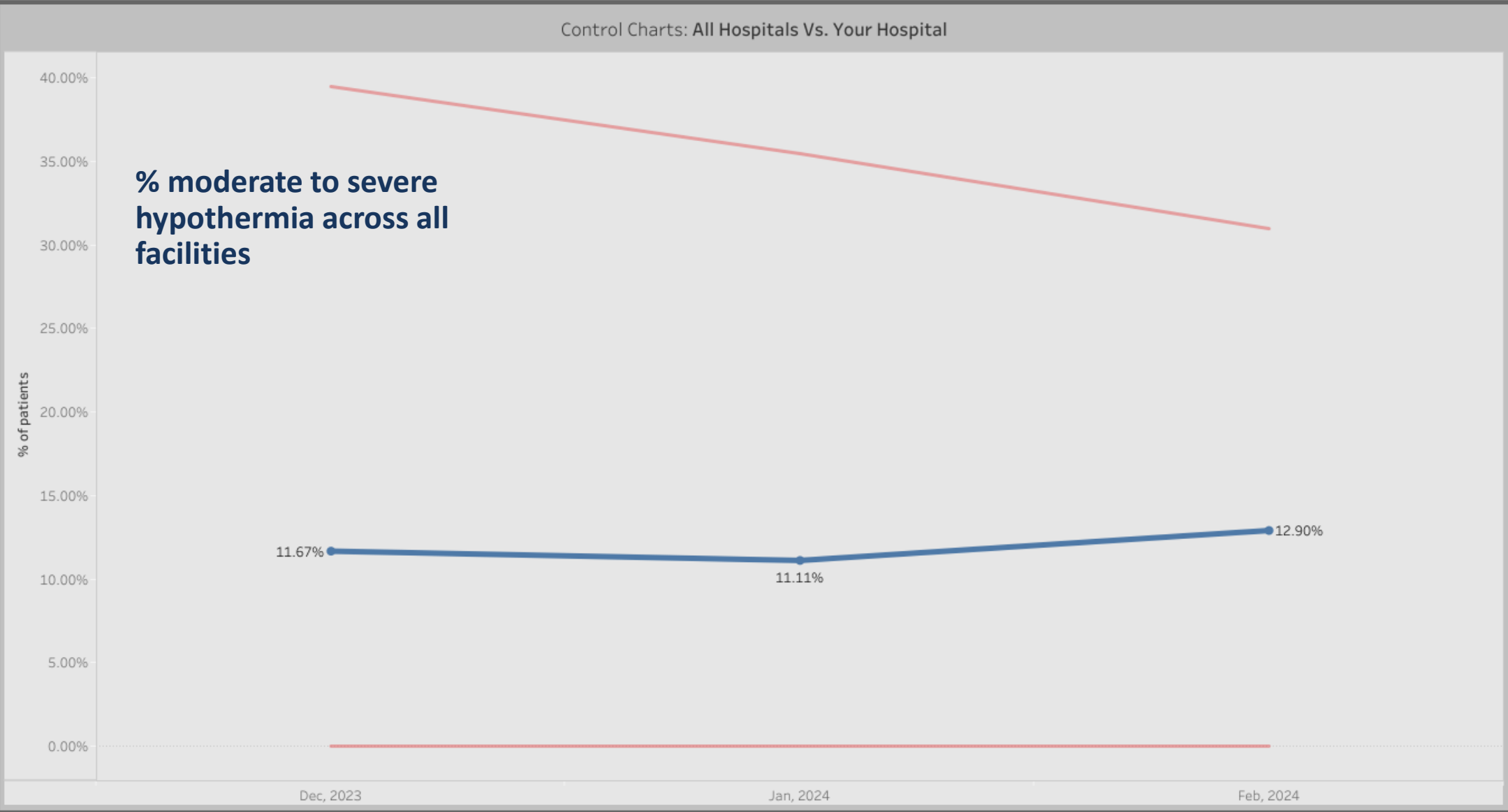
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

ALPQC

QUALITY COLLABORATIVE



# ALPQC NHP (Golden Hours)

(From December, 2023 to March, 2024)

Hide Filters

- Legends
- Lower Control Limit
  - Upper Control Limit
  - Your Hospital
  - All Hospitals

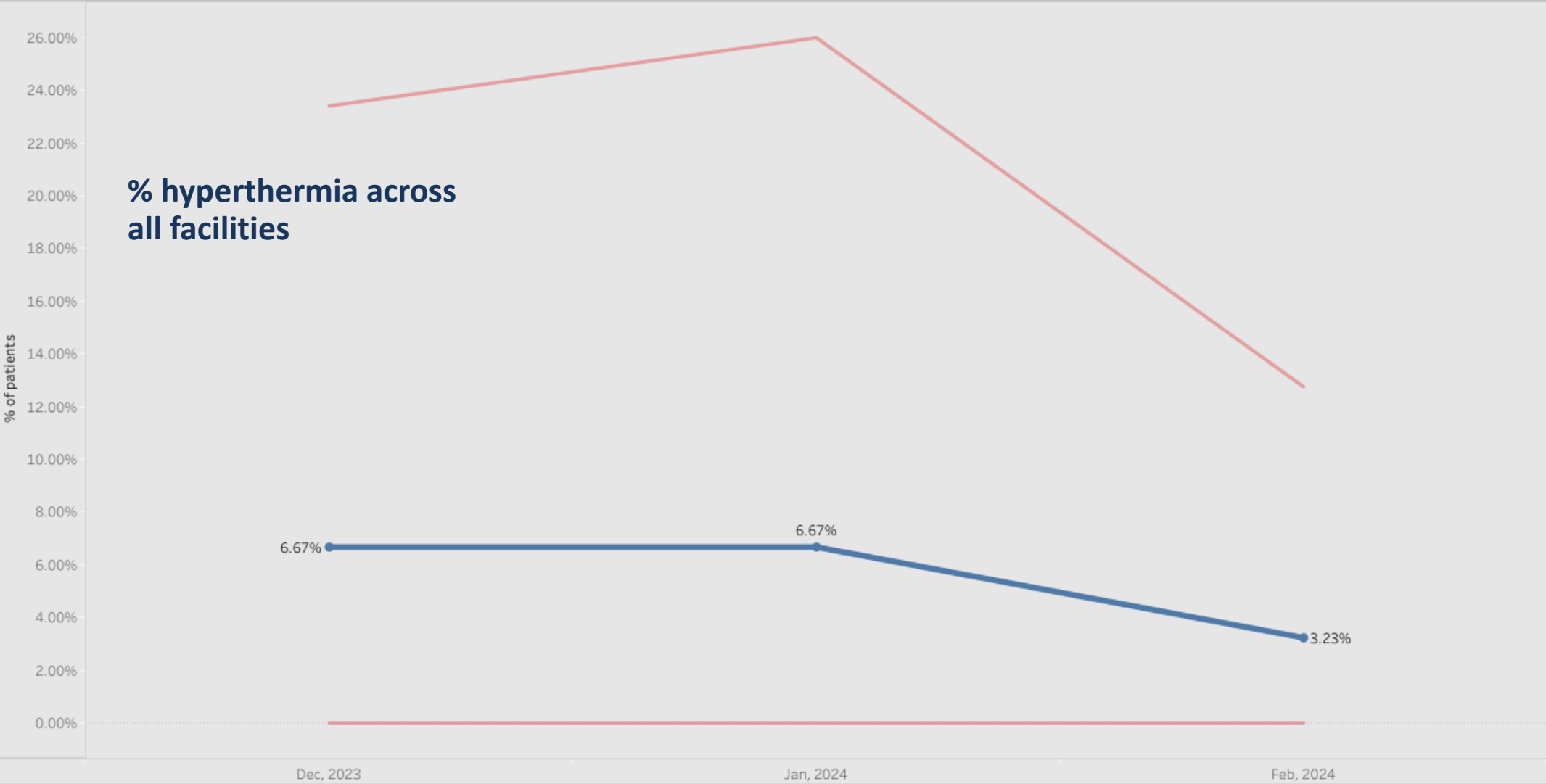
- Hospital: No Hospital
- Outcomes: Hyperthermia
- Thermias: Hyperthermia (>= ..
- Race: All
- Birth Wt: All
- GA: All
- Date: Multiple values
- Your Hospital: All
- Hospitals: All

Race/Ethnicity Data

Main Page



Control Charts: All Hospitals Vs. Your Hospital



# Prior Initiative Outcomes

Study	Year	Journal	Result
Improving the Rate of Delayed Cord Clamping in Preterm Infants: A Quality Improvement Project	2023	Hosp Pediatr	Delayed cord clamping increased from 40% to 65%
Reduction of Severe Intraventricular Hemorrhage in Preterm Infants: A Quality Improvement Project	2022	Pediatrics	Severe IVH decreased from 14% to 1.2%
A Quality Improvement Bundle to Improve Outcomes in Extremely Preterm Infants in the First Week	2022	Pediatrics	Severe IVH decreased from 16% to 10%
Quality Improvement Project to Decrease Delivery Room Intubations in Preterm Infants	2019	Pediatrics	DR intubation decreased from 58% to 37% BPD from 26% to 13%

[Revert Filters](#)[Hide Filters](#)

## Thermias Legends

- Normothermic ( $\geq 36.5$  ...)
- Mild Hypothermia ( $\geq 3$ ...
- Hyperthermia ( $\geq 37.5$  C)
- Moderate to Severe Hyp...

Hospital

Thermias

Race

Date

GA

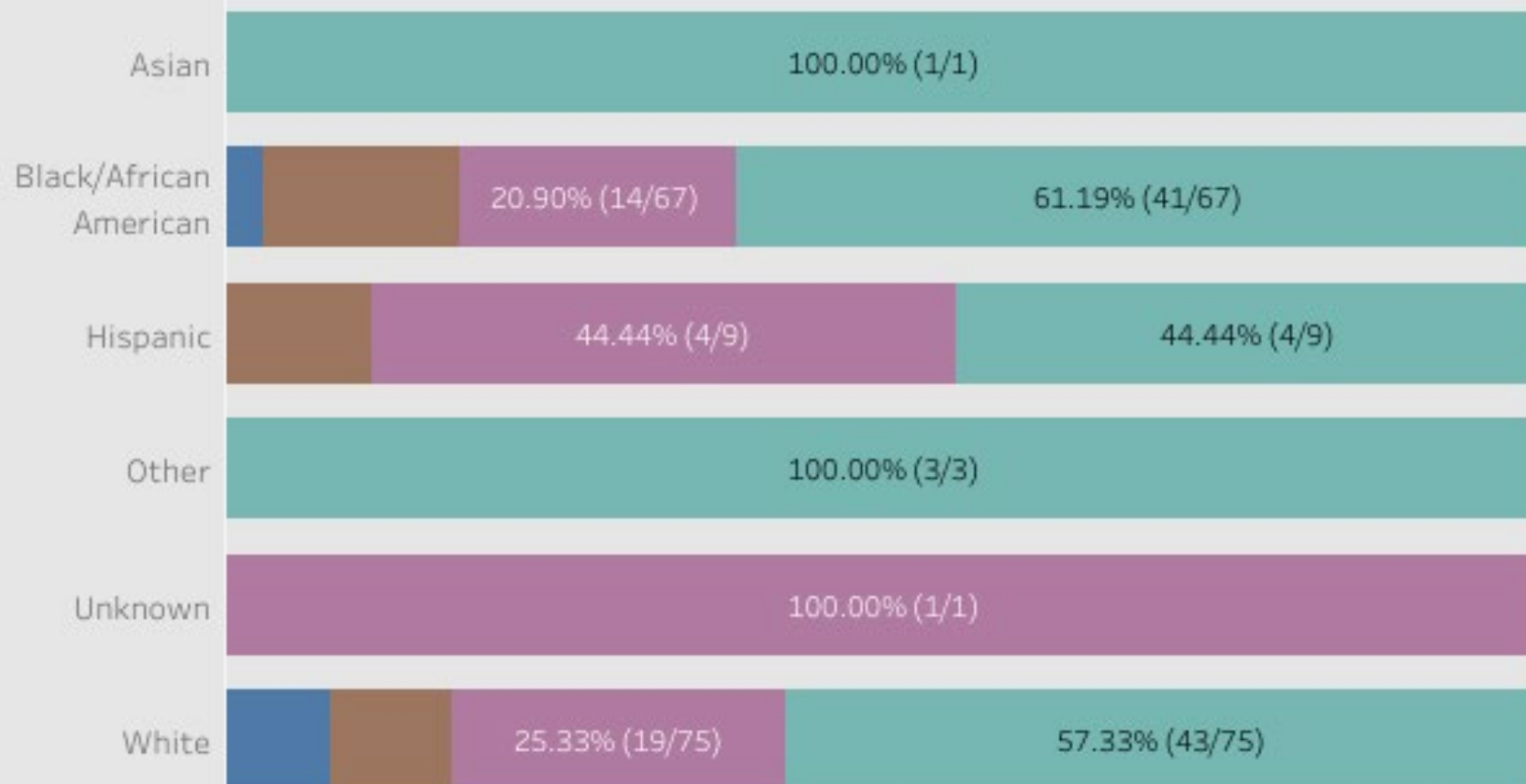
Birth Wt

Levels

Hospitals

[Race/Ethnicity Data](#)[Main Page](#)

## All Hospitals: Race O2 Thermia Counts %



Races

Asian

Unknown

Other

Hispanic

Black/African American

White

Hospital

No Hospital

Thermias

(Multiple values)

Race

(All)

Date

(All)

GA

(All)

Birth Wt

(All)

Levels

(All)

Hospitals

(All)

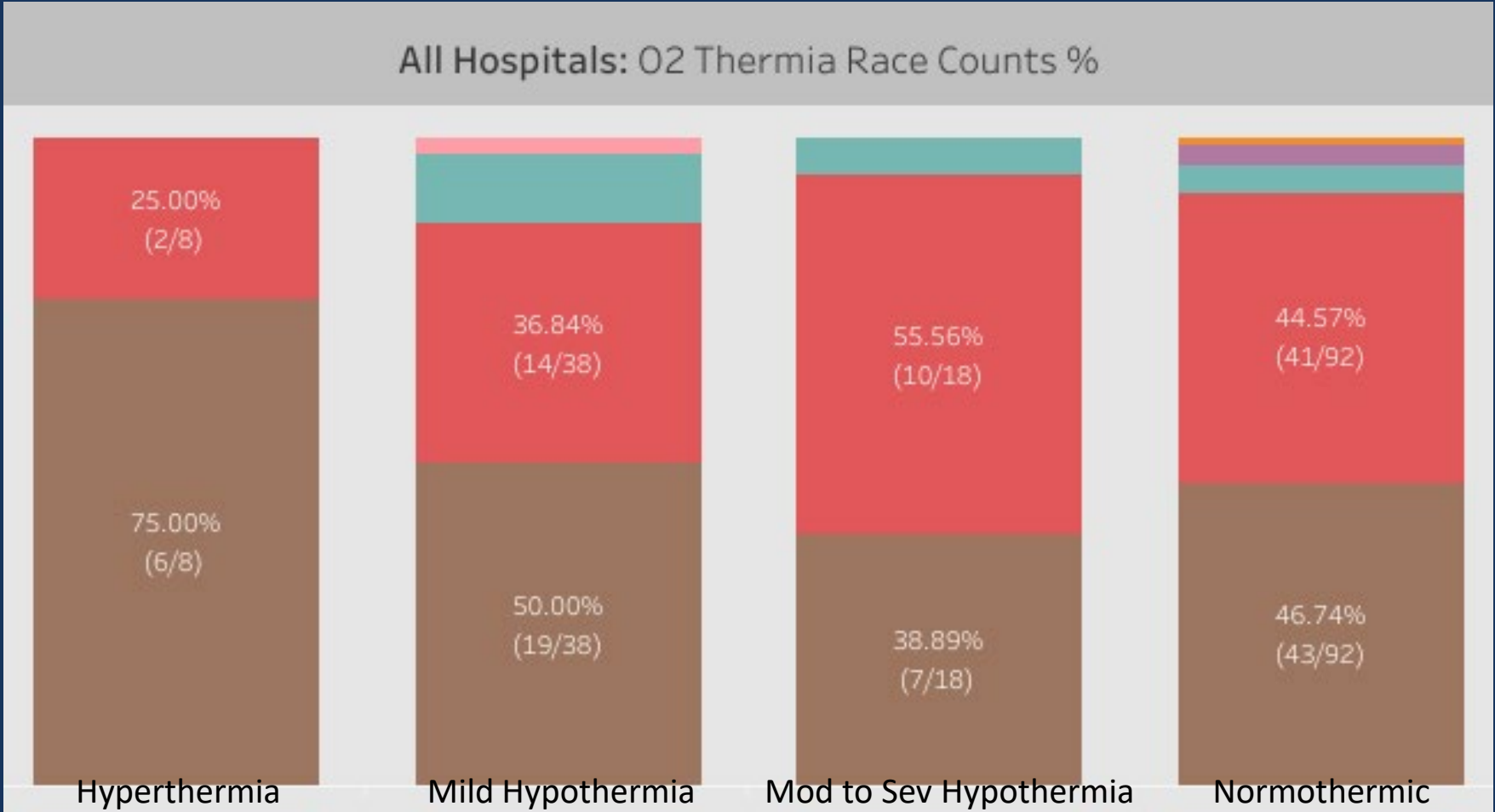
Race/Ethnicity Data

Main Page

ALABAMA PERINATAL

AI PQC

QUALITY COLLABORATIVE





# PDSA Cycles

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# Sustainable Improvement

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Subject Matter Knowledge

+

Knowledge for Improvement





# Sustainable Improvement

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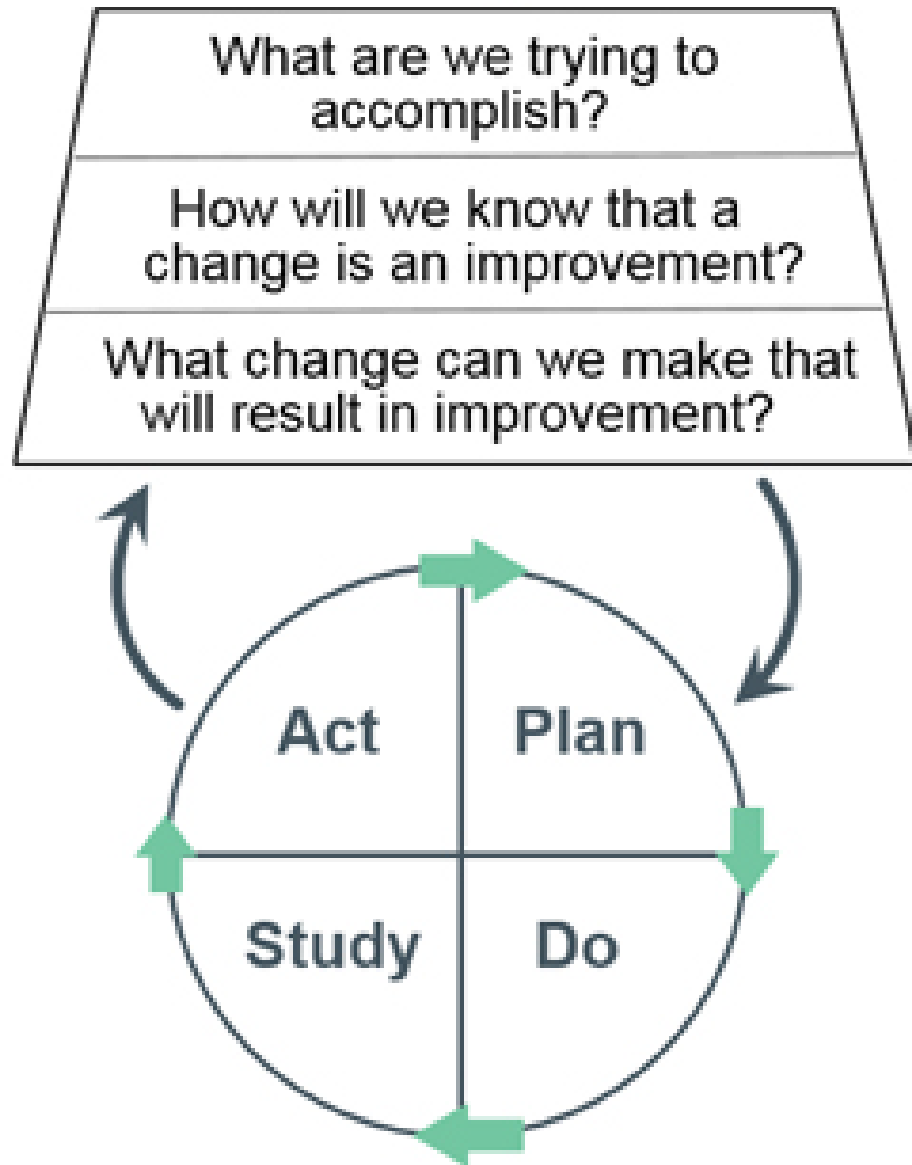
- *Will* to do what it takes to change to a new system
- *Ideas* on which to base the design of the new system
- *Execution* of the ideas





# Operationalizing the Model

## Model for Improvement



Setting your SMART aim



Measurement Strategy



Key Driver Diagram ->  
Change Package



Testing Changes via PDSA cycles



# SMART Aim Statement

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**Specific** (clearly stated)

**Measurable** (measurable numeric goals)

**Actionable** (within control/influence)

**Relevant** (aligned with organization)

**Time bound** (specific time frame)





# Measurement Strategy

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- Reflect the aim statement
- Guide improvement and test changes
- Purpose is to enhance not learning, NOT judgement
- Measures do have limitations
- Makes improvement goal oriented





# PDSA

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- Happening constantly
- Not all changes result in improvement
- Important to adapt components of the change package to the actual environment
- Start with small tests of change
- PDSA **cycles**



# Plan

- Assemble a team
- Identify the issue
- Ask basic questions:
  - How do we do it?
  - What are steps in the process?
  - Who should we involve?
  - How can we reduce variation in the process?
- Predict what will happen



# Do

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- Test your idea
- Prepare (training, resources)
- Start small (n=1); less risk, work out kinks
- Monitor your progress (continuous system)

# Study

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- Reflect on your test
- What has changed?
- Was it effective?
- Changes worth keeping?
- How does this differ from your prediction?



# Act



- 
- Adapt, Adopt, Abandon
  - Act on your reflection
  - Implement positive changes
  - Consider spread
  - If negative results, consider removing/revising
  - Failures during testing can be useful!



TEST DETAILS
<b>Project Name:</b> ALPQC Hypothermia Initiative
<b>Project SMART Aim:</b>  Reduce hypothermia by 20% within 1 year of initiative start
<b>Test Name:</b> Nursing implementation of broadened use of plastic wrap
<b>Test Start Date:</b> 4/1/2024 <b>Test Complete Date:</b> 5/1/2024
<b>What key driver does this test impact?</b> Delivery room management
<b>What is the objective of the test?</b> To standardize the use of plastic wraps at delivery in infants born between 29 and 32 weeks' gestation.



## 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)  $\geq 32$ w GA and 2)  $< 32$ w GA

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.

# Hypothermia Prevention Key Driver Diagram

## 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

## PLAN:

Briefly describe the test: Given the high proportion of infants between 29 and 32 weeks' with hypothermia, we are planning to expand our use of plastic wraps in this population.

**How will you measure the success of this test?** By measuring the frequency of plastic wrap use and frequency of hypothermia within this population

**What would success look like?** 1) >80% of NOWS infants receiving plastic wrap exposure in the DR 2) a 10% reduction in the frequency of hypothermia in this GA range 3) no increase in the frequency

**What do you predict will happen?** There may be inconsistency in the use of plastic wraps as we roll out a new process

**Plan for collection of data:** Audit our random sample for the use of plastic wraps in this patient population

## Tasks:

Name of Task	Person Responsible	Dates:	Location
Nursing Education	Barbara (nurse educator)		
Confirm higher volume of plastic wrap availability	Debbie (nurse leadership)		
Division education	Harold (physician lead		

<b>DO:</b>
Was the cycle carried out as planned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Record data and observations: Some nurses were not aware of the change in this process.
What did you observe that was not part of the plan? Some DRs did not have plastic wraps available.

<b>STUDY:</b>
Did the results match your predictions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Compare the result of your test to your previous performance: There was inconsistency in the use of plastic wraps in this patient population (~50%).
What did you learn? We need to identify additional opportunities to remind staff of this new process, such as morning huddles, improved education for delivery staff, and sharing data regarding our plastic wrap use with staff.

<b>ACT: Decide to Adapt, Adopt, or Abandon</b>
<input checked="" type="checkbox"/> Adapt: Improve the change and continue testing the plan. Plan/changes for the next test: Roll out additional reminders to staff
<input type="checkbox"/> Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability
<input type="checkbox"/> Abandon: Discard the change idea and try a different one

# Q&A

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

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

# Reminders

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- NOWS Sustainability reporting will be due April 30<sup>th</sup>
  - Reporting period: Jan-Mar 2024
  - Link sent out on April 15<sup>th</sup>
- Monthly (March) *and* Quarterly data (Jan-March) for NHP will be also be due April 30<sup>th</sup>
  - Links to all surveys sent on April 15<sup>th</sup>
  - Please let us know if you did not receive links and we will send them out ASAP

# Stay Connected!

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**Website:**

**<http://www.alpqc.org>**

**Email:**

**[info@alpqc.org](mailto:info@alpqc.org)**

**X (Twitter): @alpqc**

**<https://twitter.com/alpqc>**

# Next Meeting

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**Wednesday, May 22<sup>nd</sup> at 12pm**

# Thank you!

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