Improving Family Engagement and Reducing Disparities Through Telehealth in the Neonatal Intensive Care Unit

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BACKGROUND

For infants admitted to the Neonatal Intensive Care Unit (NICU):

- Parental behaviors and engagement are strongly linked to their infant's overall health, development, and readiness for discharge
- A critical component of family engagement is parental/caregiver presence at bedside, as families can directly interact with their baby and receive important education and information
- Many NICU families experience one or more challenges with regular visitation including caregiving responsibilities for older siblings, return to work, and transportation.

CONTENT/ACTION

The following presents the results of a recent quality improvement initiative to increase frequency of parental participation in nursing care sessions by offering families the opportunity to participate virtually via iPads throughout an infant's NICU admission.

Goal Metric: 1 care session per day for 4 days per week, indicating families were present more days than not, with aim of 90% of families meeting this mark

The project team used Plan-Do-Study-Act cycles (PDSA cycles) to create an iterative cycle of improvement and systematically test the technology and implementation processes.

Prior to this intervention, there were no systematic ways for families to engage with their baby virtually.

Baseline phase: Baseline visitation data was collected over the course of 29 weeks from the electronic medical record (EMR), to identify how many families were present for cares at least 4 days per week.

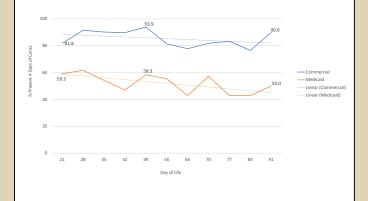
Intervention phase: Over the course of several PDSA cycles, telehealth was introduced by the psychology team to allow families to be virtually present for care times. Data presented is from the last 29 weeks of the project.

RESULTS

Percent of Families Present for 4 Days of Cares Per Week During Baseline Phase



Percent of Families Present for 4 Days of Cares Per Week During Implementation Phase



DISCUSSION

Lessons Learned:

- Telehealth is likely to be met with resistance from team members
 - Worries related to increased time/workload, discomfort with technology, and "awkward interactions" with families
- Introduction of new workflows is best supported by hearing and addressing team concerns, modeling usage, and identifying champions who can increase buy in
- Telehealth is one way to address barriers to family engagement in the NICU, but caution should be exercised not to further isolate families without access to, or proficiency with, technology

Implications for Practice:

- Virtual care sessions are one way to increase family engagement in the NICU
- Telehealth can address disparities that disproportionally impact families with lower socioeconomic status (as indicated by Medicaid coverage)
- Despite progress, the gap between privately and publicly insured families was not closed, meaning there is still work to be done to ensure that all families can be present with their infant throughout a NICU admission

Future Directions:

- · Family and staff satisfaction data
- Additional methods to support family engagement for families with Medicaid

REFERENCES

Pineda, R., Bender, J., Hall, B., Shabosky, L., Annecca, A., & Smith, J. (2018). Parent participation in the Neonatal Intensive Care Unit: Predictors and relationships to neurobehavior and developmental outcomes. Early Human Development, 117, 32–38. https://doi.org/10.1016/j.earlhumdev.2017.12.008