

Homeward Bound Initiative:

NICU Discharge Preparedness and Transition to Home

Kickoff October 18, 2023



FPQC's Vision and Values

"All of Florida's mothers, infants & families will have the best health outcomes possible through receiving respectful, equitable, high quality, evidence-based perinatal care."



- Voluntary
- Data-Driven
- Population-Based
 Value-Added

- Evidence-Based
- Equity-Centered



FPQC Partners & Funders



















Florida Society of Neonatologists

Advancing the Care of Neonates in the Sunshine State

















Homeward Bound Leadership Team

Provider Leads





FPQC Leads

QI Team

Data Team



Vargabi Ghei



Sue Bowles



Lelis Vernon



Lori Reeves



Nicole Pelligrino



Estefania Rubio



Benjamin Gessner



Patoula Panagos



Linda Detman Estefanny Reyes Sara Stubben Martinez



Shelby Davenport





Recognizing a Visionary Leader

"A leader takes people where they want to go. A great leader takes people where they don't necessarily want to go, but ought to be." Rosalyn Carter

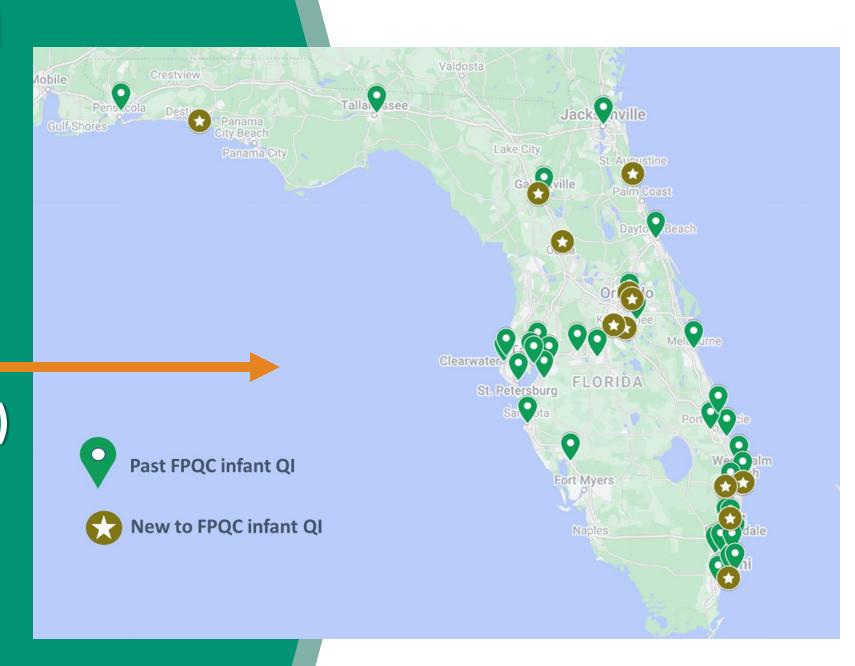


Dr. William "Bill" Sappenfield

Homeward Bound Participating Hospitals

49 Florida NICUs

68% FL NICUs (LII+)





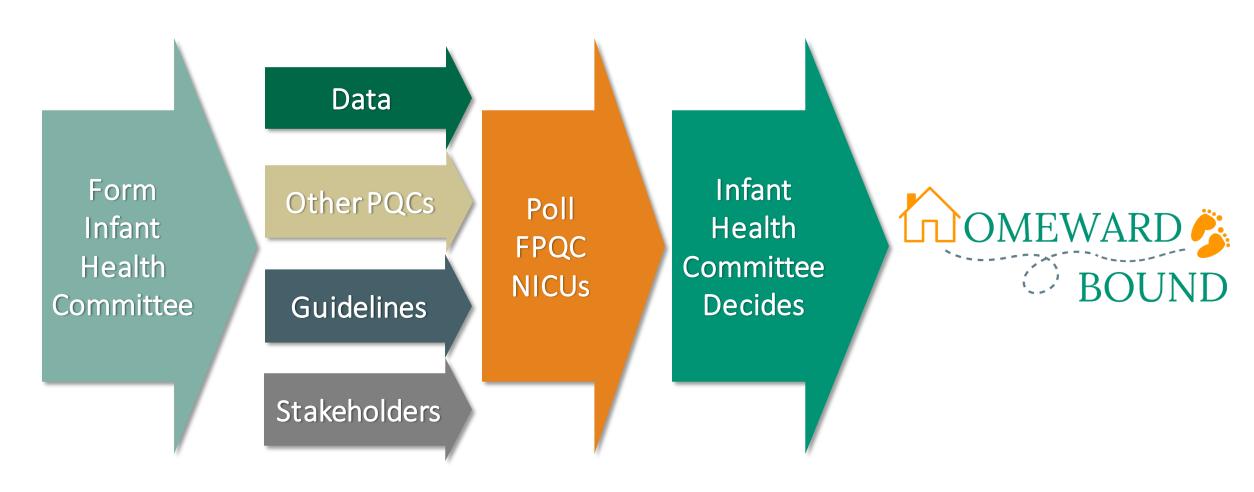
Hospitals New to FPQC Infant Initiatives

- AdventHealth Altamonte
- AdventHealth Celebration
- AdventHealth Ocala
- AdventHealth Winter Park
- Ascension Sacred Heart on the Emerald Coast
- Good Samaritan Medical Center

- HCA Florida Mercy Hospital
- HCA Florida North Florida Hospital
- HCA Florida Osceola Hospital
- HCA Florida Palms West Hospital
- •UF Health St. John's (Flagler Hospital)
- West Boca Medical Center



Selecting Infant Health Initiatives





NICU Discharge Preparedness & Transition to Home

Journal of Perinatology

www.nature.com/ip

CONSENSUS STATEMENT



NICU discharge preparation and transition planning: guidelines and recommendations

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In this section, we present Interdisciplinary Guidelines and Recommendations for Neonatal Intensive Care Unit (NICU) Discharge Preparation and Transition Planning. The foundation for these guidelines and recommendations is based on existing literature, practice, available policy statements, and expert opinions. These guidelines and recommendations are divided into the following sections: Basic Information, Anticipatory Guidance, Family and Home Needs Assessment, Transfer and Coordination of Care, and Other Important Considerations, Each section includes brief introductory comments, followed by the text of the quidelines and recommendations in table format. After each table, there may be further details or descriptions that support a guideline or recommendation. Our goal was to create recommendations that are both general and adaptable while also being specific and actionable. Each NICU's implementation of this guidance will be dependent on the unique makeup and skills of their team, as well as the availability of local programs and resources. The recommendations based only on expert opinion could be topics for future

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ABOUT THE GUIDELINES

The foundation for these recommendations is based on existing literature, practice, and available policy statements. Given the range of topics we cover, there are some situations where there is no published literature specific to a recommendation. In some situations, we relied on the lived experiences of families and providers to inform our recommendations. While there may not be supporting references for some of these recommendations, all of the recommendations are based on expert opinion and consensus and the readers are requested to note this issue while adapting them into their practices, if they choose to. The recommendations based only on expert opinion could be topics for future research. Our guidelines are divided into the following sections:

- Basic Information
- · Anticipatory Guidance
- Family and Home Needs Assessment Transfer and Coordination of Care
- Other Important Considerations

Each section includes brief introductory comments, followed by the text of the guidelines and recommendations in table format. After each table, there may be further details or descriptions that support a guideline or recommendation

It is impossible to create a comprehensive discharge preparation and transition planning program that will work for every family in every

NICU setting. Rather, what we propose are guidelines and recommendations that focus on content and process. We strived to create recommendations that are both general and adaptable while also being specific and actionable. Each NICU's implementation of this quidance will be dependent on the unique makeup and skills of their team, as well as the availability of local programs and resources.

Discharge planning is the process of working with a family to help them successfully transition from the NICU to home. To this end, each family will need to participate in a comprehensive discharge planning program that has been tailored to their and their infant's specific needs. The first section is basic information and is meant to emphasize content that every family will need, without taking into account each family/infant's specific needs

In preparing for discharge, your team will have to set clear criteria for what each family and infant need to accomplish to be ready to transition from the NICU to home. The NICU team should work with the family and confirm that the family understands the NICU discharge planning process. It is important that families understand that it is difficult to plan for a specific discharge date because discharge readiness is often conditional (e.g., the infants has no further spells, is able to gain weight, pass a car seat test, etc.) The fluid and uncertain nature of discharge readiness can be a source of frustration for families. To help minimize frustration and avoid misunderstandings, it is important to have consistent messaging. emphasizing that there can be wide variations in when an infant is discharged based on clinical indications and medical opinions.

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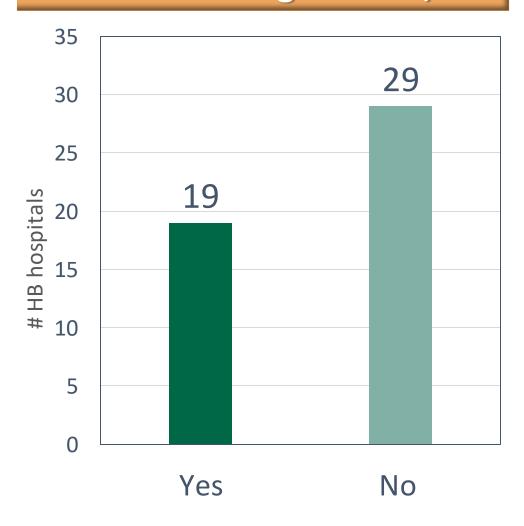
SPRINGER NATURE

- Comprehensive discharge preparation ensures an optimized discharge and transition of the NICU baby to home.
- Comprehensive, consistent, and early discharge preparation can lead to more effective and efficient NICU discharge and transition to home as well as improve caregiver and family satisfaction.
- Families, patients, and staff benefit when an inclusive, multidisciplinary, family-centered discharge preparation program is used to prepare for discharge and transition from the NICU.



Current Hospital Discharge Efforts

Current Discharge Efforts, HB



Type of Current Discharge Activities, HB

	Of 48 HB
	hospitals
Checklists/tools	17%
Family Engagement & Ed.	13%
DC Discussions	10%
Post DC Calls	6%
Collaboration	4%
Discharge Coordinator	2%
SDOH Screening	2%



Vision: Integrate family into a "Family Centered" discharge process that encompasses Dignity & Respect, Participation, Communication, and Information Sharing. The process begins on admission, empowering families to collaborate with the clinical interdisciplinary team throughout their baby's transition from NICU admission to discharge home.

Aim



By June 2025, each participating NICU will achieve a 20 % increase in discharge readiness for NICU infants as measured by

- Parental technical readiness checklist
- Emotional readiness score by survey

Secondary Aim:

By June 2025, each participating NICU will achieve a 20% increase in the completion of a discharge planning tool upon discharge home



Primary Key Drivers

Family Engagement & Preparedness

Health Related Social Needs

Transfer and Coordination of Care

Family-centered care is a universal component of every driver & activity

Why Participate in an FPQC Initiative?

- Provides a complete hospital QI initiative at no charge including background, change package, rapid data reporting and coaching/mentoring/sharing.
- Initiatives are developed using evidence-based guidelines, research, best practices, and national expert consultation.
- Multi-hospital QI initiatives promote earlier, larger and more sustainable QI practice gains.
- Promotes networking among clinicians around the state on major practice and treatment issues.
- Provides publication, presentation, education and leadership opportunities.
- Promotes state and community system improvements.
- Meets Florida state statute requirements to participate in two maternal and/or infant health QI initiatives at all times.





Initiative Timeline

FALL 2023

- Recruit leadership team
- Application deadline
- Complete Pre-Implementation Survey
- Kick Off Meeting, October 18

FALL 2024

• Mid-Initiative Meeting



JUNE 2025

Initiative completion



JANUARY 2024

- Individual hospital Kick Offs
- Start of:
 - Webinars/coaching calls
 - Local team/department meetings
 - o On-site technical assistance
 - Data collection

MAY 2025

 Initiative hospital postimplementation survey





QUESTIONS?

