

# PAIRED Implementation Guidance

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Susan M. Bowles, DNP, RNC-NIC,  
PAIRED Nurse Consultant



# Keys to Building a Successful Initiative



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ENGAGE KEY STAKEHOLDERS  
FROM THE START

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MULTIDISCIPLINARY PLANNING  
AND IMPLEMENTATION

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C- SUITE SUPPORT

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CONSISTENT COMMITMENT BY  
ALL TEAM MEMBERS

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# Components of Successful Participation

- Create a QI culture—a team environment emphasizing quality and patient safety
- Hold regular QI team meetings to follow and make progress
- Share important information, progress and successes with everyone around
- Be creative and flexible!



# WHO SHOULD BE ON THE TEAM

- Neonatologists
- Nursing Staff
- Director/Manager
- Quality Improvement
- IT
- Social Work
- Therapists/ RT, OT,PT,
- Parents
- Others



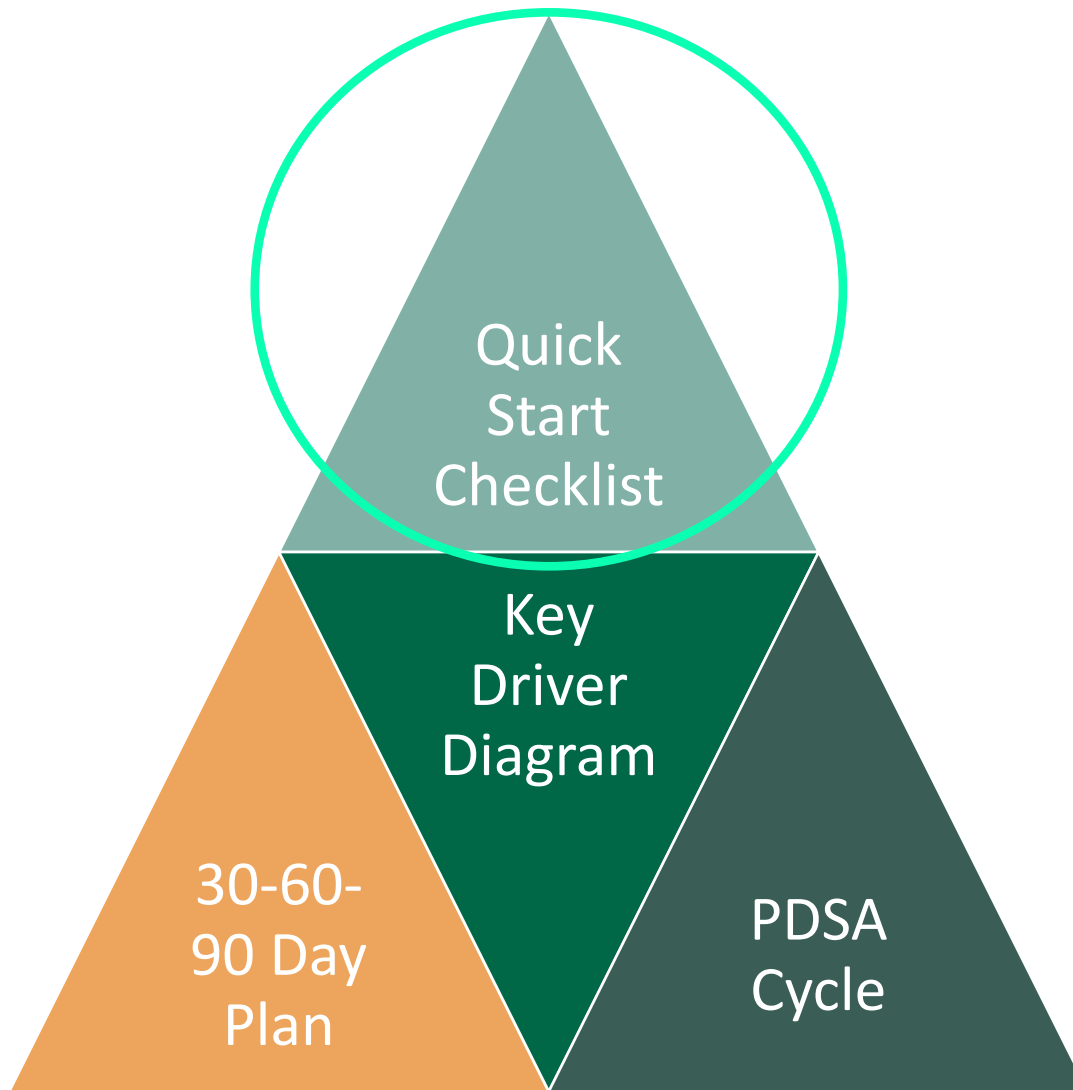
# Create a Culture Ready for Change

- Must be a multidisciplinary effort
- Teams must meet regularly
- Ability to provide a safe environment for:
  - Listening
  - Questioning
  - Persuading
  - Respecting
  - Helping
  - Sharing
  - Participating
- Use the Toolkit!



# Team Meetings

- Meet bi-weekly/ monthly to start then may be less frequent later
- Include all departments impacted by your work
- Have an agenda and take minutes.
  - Review data, 30-60-90 Day Plan, PDSA cycles, and potential community partners
  - Discuss insights from webinars/coaching
- Share progress and challenges with administration – follow communication plan



# Quick Start Checklist



1. Recruit QI team – lead, physician lead, nurse lead, QI/data lead, administrative champion



2. Review, complete and return PAIRED Data Use Agreement



3. Attend PAIRED Kick-off Meeting

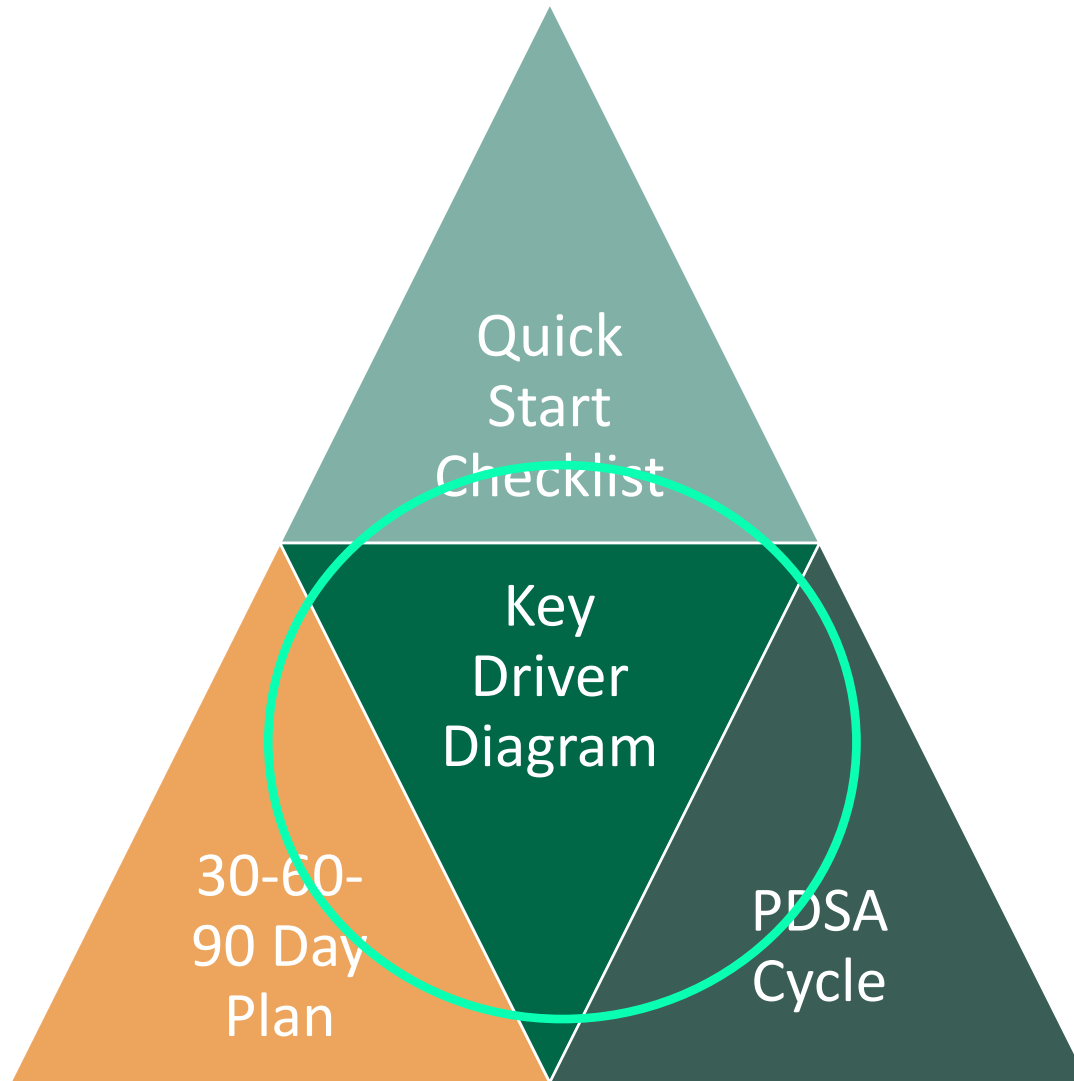


4. Complete the PAIRED Team Readiness Survey and identify team goals



5. Write down questions or concerns





## Tools to Use

# PAIRED—Family-Centered Care

## AIM

## PRIMARY DRIVERS

## SECONDARY DRIVERS

## PBPs

### PRIMARY

By 6/2023, each NICU will achieve a 20% increase from baseline in the percentage of infants who receive skin-to-skin care from at least one family caregiver within 3 days of clinical eligibility as defined by individual unit protocols.

### SUPPLEMENTAL

By 6/2023, family caregiver surveys will demonstrate a 20% improvement from baseline in the perception of the culture of family-centered care in each NICU as averaged across all 4 domains.

### Participation

Participation of family in care

Educate family caregiver(s) to become active participants in the care of their infant from admission to discharge

Provide family caregiver(s) with appropriate and increasing direct care opportunities.

- Encourage family caregiver(s) participation in early skin-to-skin care
- Include of families in daily rounds/creation of daily care plans/handoffs
- Provide early and continuing lactation support to promote breastfeeding
- Revisit and revise policies that limit caregiver interaction with infant

### Dignity and Respect

Identification of each infant and family member as an individual

Acknowledge that each infant and family member is an individual. Incorporate family knowledge, values, beliefs and cultural backgrounds into the planning and delivery of care.

- Create a culturally sensitive environment supportive of skin-to-skin care (reclining chairs, access to food and water, privacy)
- Identify infant and family caregiver(s) by appropriate names in all interactions
- Celebrate milestones and transitions

### Collaboration

Respectful and effective communication and partnership with families

Establish a culturally sensitive environment in which families feel respected and that fosters anticipatory and effective communication with and trust from family caregiver(s).

Encourage collaboration with families, caregivers and unit leaders in the development, implementation, and evaluation of policies and procedures; in educational programs; and in protocols for family participation in care.

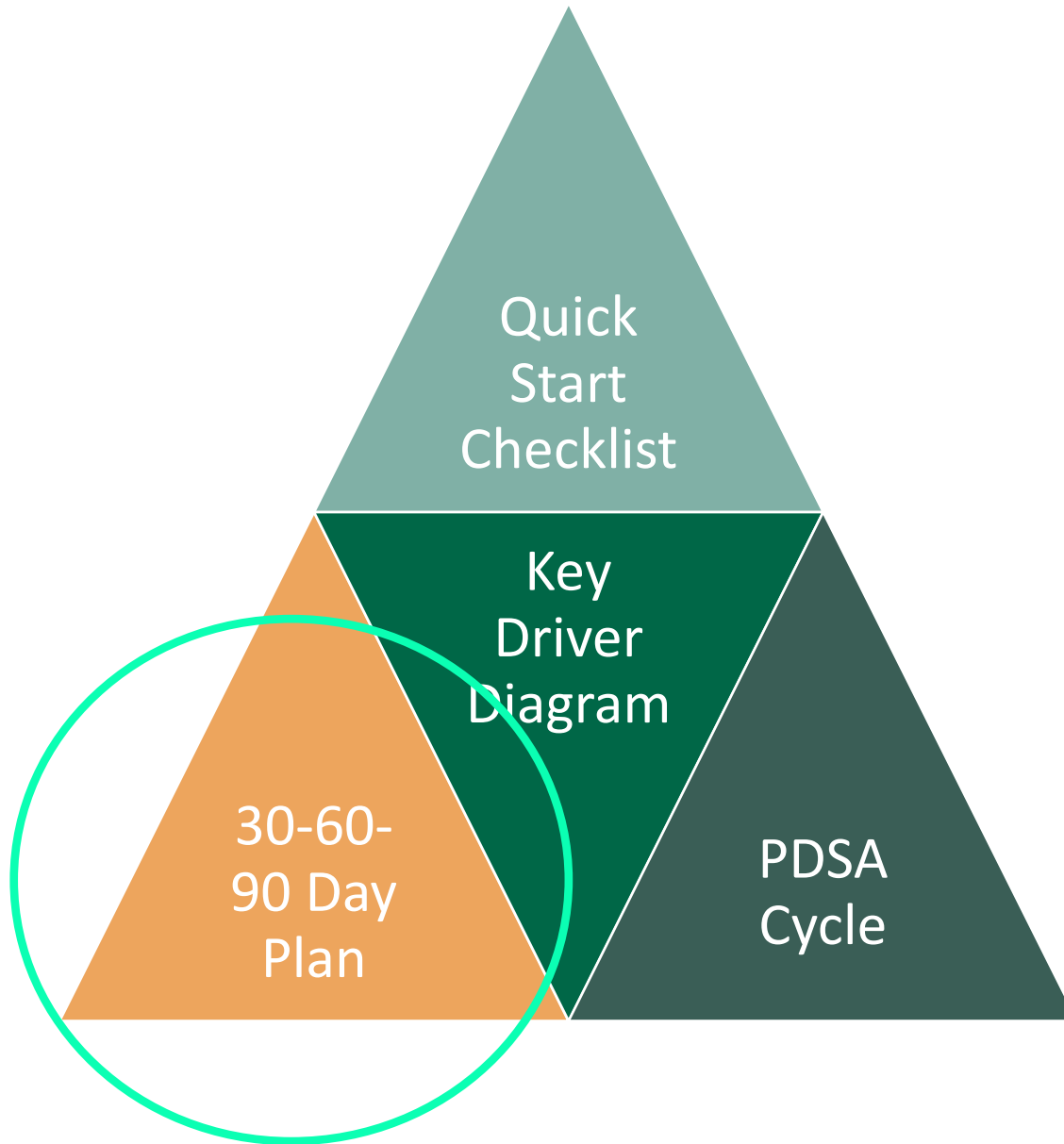
- Consult families, revisit and revise policies that limit family caregiver interaction with infant (protocols regarding skin-to-skin care, holding, visitation, signage, etc.)
- Improve antenatal counseling
- Adopt technologies to improve communication with family caregiver(s) who cannot be at bedside
- Recruit, create and sustain a family advisory council/partnership team
- Engage families in the development of effective patient safety and quality initiatives
- Develop uniform approach to scheduling and staffing complex care conferences with families

### Information Sharing

Education about medical care and clinical processes

Provide family caregiver(s) with complete, accurate and unbiased information and graduated education throughout the NICU stay to allow effective participation in care, to optimize decision-making, and to enable caregivers to become competent primary caregivers for their infant(s).

- Initiate family caregiver and staff competency training on skin-to-skin care
- Initiate medical education early and throughout NICU stay
- Utilize verbal, written, and graphic methods of teaching to support family understanding and health literacy



# 30-60-90 Day Plan

Foundations	
Strengths	
Barriers	

Looking Ahead	
Three Things to Accomplish in the Next 30 Days	
Three Things to Accomplish in Next 60 Days	
Three Things to Accomplish in Next 90 Days	

## Foundations

### Strengths

*We have a strong physician champion and good administrative support*

### Barriers

*Some of our providers and staff are very resistant to change*

## Three Things to Accomplish in the Next 30 Days



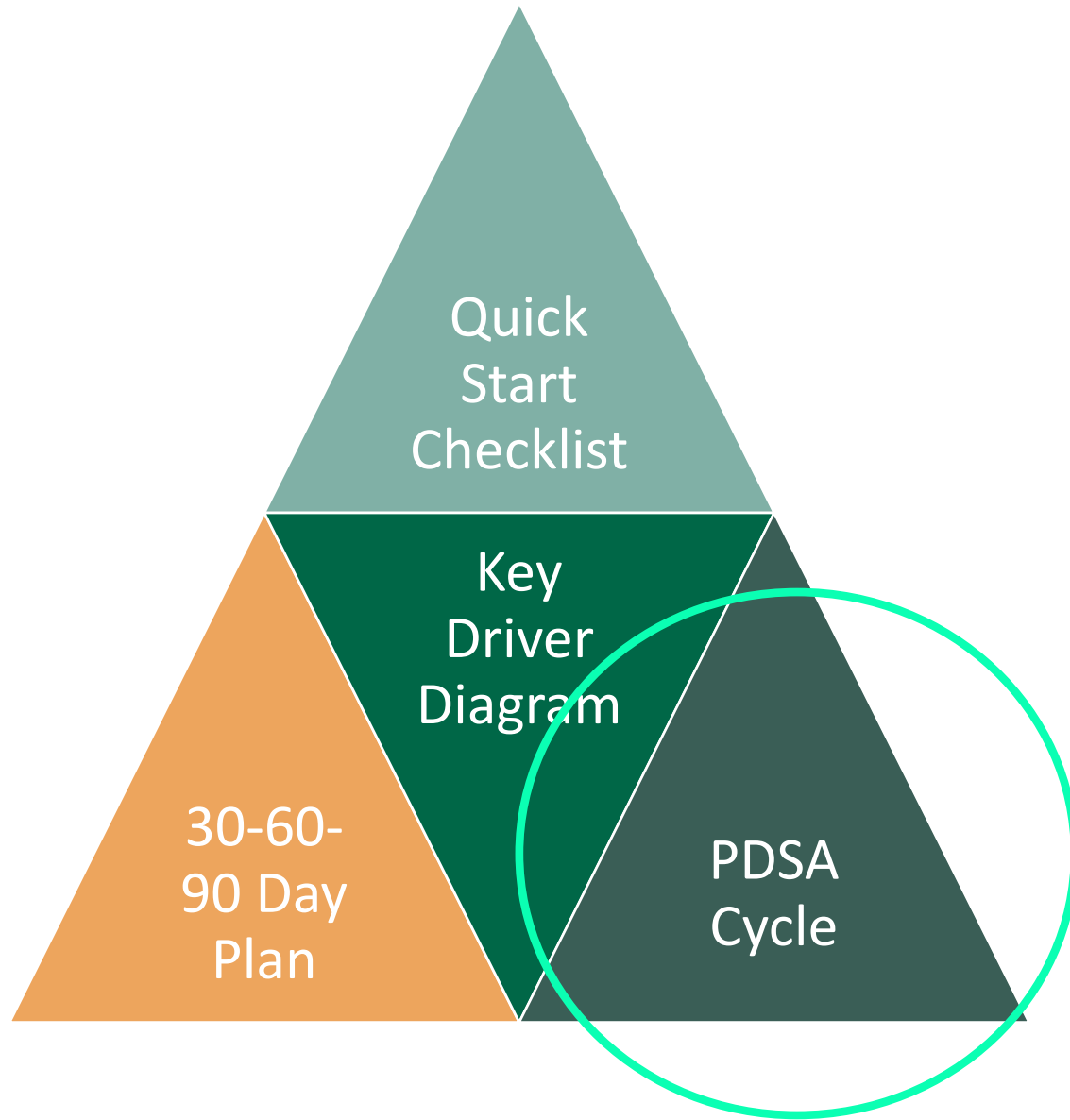
Review multidisciplinary team members and fill any gaps



Schedule team meetings for 6 months



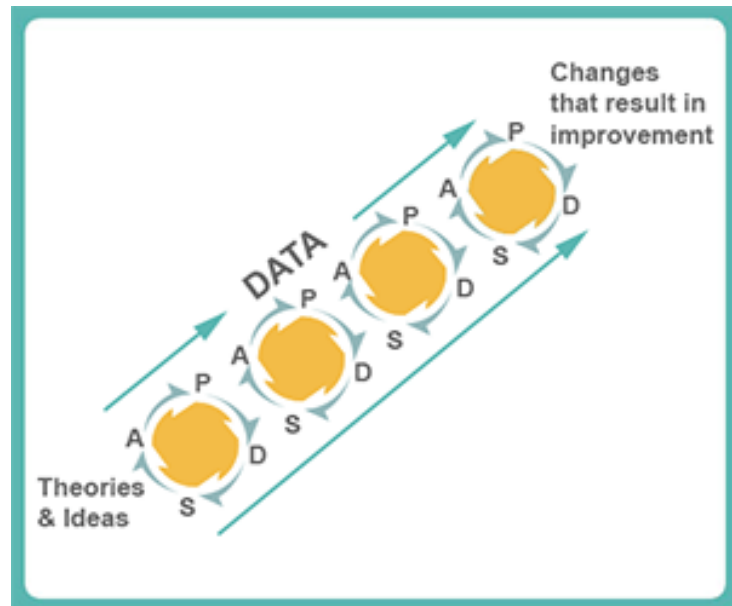
Review and revise unit policies to allow for early Skin to Skin Care.



# What is a PDSA cycle?

- Useful tool for developing & documenting tests of change to **for improvement**
- AKA PDCA, Deming Cycle, Shewart Cycle

- P** – **Plan** a test
- D** – **Do** a test
- S** – **Study** & learn from test results
- A** – **Act** on results



*Dr. Balakrishnan will delve into PDSAs during her presentation!*



# Reasons to test changes



***Learn*** whether change will result in improvement



***Predict*** the amount of improvement possible



Evaluate the proposed change work in a ***practice environment***



***Minimize resistance*** at implementation

# Potential Implementation Barriers & Strategies to Overcome

## Potential Barrier Drivers

- Time limitations

## Strategies to Overcome

- Make sure meetings are organized and succinct to decrease the impact on time
- Use efforts of staff members-consider use of nurse clinical ladder to support project
- Standardize meeting time for ease of scheduling; consider web-based meetings for those off site
- Use regularly scheduled department meetings to highlight project and results-be succinct

# Potential Implementation Barriers & Strategies to Overcome

## Potential Barrier Drivers

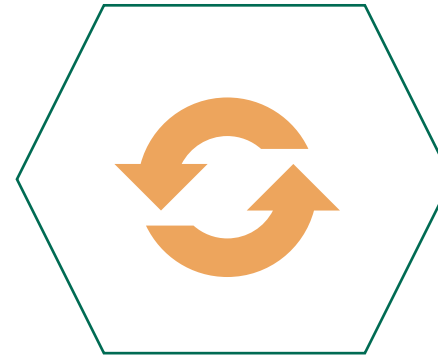
- Resource limitations

## Strategies to Overcome

- Connect with other hospitals or QI leaders for potential solutions; or sharing resources through collaborative work

# As the Project Continues...

- **Celebrate** successes along the way
- **Display data by** keeping it current AND interesting
- **Make it stick**
  - Routinization
- **Plan for sustainability**



Where do I  
Start BEFORE  
I start?

Assess	Review	Attend	Plan
Assess your team to assure all critical departments included	Review PAIRED resources	Attend Data Collection Webinar <b>Friday, March 26, 2021, 12-1 PM ET</b>	Plan for PAIRED launch – bulletin boards; staff meetings; event invitations

March-April

## April

Launch

Official launch in your hospital!

Educate providers and facility leadership on importance of facility-wide standards

Engage staff and clinicians

Present your hospital's PAIRED participation



Begin

Begin submitting prospective data

## PAIRED Initiative Resources

### Technical Assistance

from FPQC staff,  
state Clinical  
Advisors, and  
National Experts

Monthly  
Collaboration  
Calls with  
hospitals  
state-wide

Project-wide in-  
person  
collaboration  
meetings

Educational  
sessions, videos,  
and resources

Monthly and  
Quarterly QI  
Data Reports

Monthly e-  
mail Bulletins

Custom, Personalized  
webcam, phone, or on-site  
Consultations & Grand  
Rounds Education

### Online Tool Box

Algorithms, Sample protocols, education tools, Slide  
sets, etc.



<http://www.fpqc.org/PAIRED>

# PAIRED Initiative Website

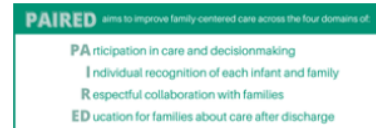
## PAIRED Initiative



### Family-Centered Care in the NICU

Family-centered care (FCC) is a shared approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnership among health care professionals, patients, and families. FCC assures that health care is responsive to priorities, preferences, and values of patients and their families. FCC recognizes that families are essential partners not only to improve the quality and safety of health care for the patient, but also to improve outcomes for the family.

The initiative is currently being piloted. Recruitment of new hospitals will occur in late Summer 2021.



### About the Pilot Initiative

We are designing PAIRED to assist NICUs in developing and implementing unit-specific strategies that will improve how a family engages with the NICU staff to assist in the care of their infant in a way that provides value to the family and to the NICU team. As its centerpiece project, this initiative will facilitate **adoption or expansion of safe skin-to-skin care**, which has a growing evidence base for achieving better infant and family outcomes.

Pilot hospitals for this initiative will help assess, refine and optimize the FCC change package, family survey and reporting system for a larger PAIRED Initiative.



### Initiative Resources and Tools

The PAIRED Online Tool Box contains project tool kit documents, example policies and educational materials, and more for hospitals who are implementing the PAIRED Initiative.

[Visit the Online Tool Box for PAIRED Hospitals](#) >



Click here to visit the **TOOL BOX**



### PAIRED Initiative: Family-Centered Care in the NICU Online Tool Box

The Initiative's main focus is Skin to Skin Care (SSC).

New items are added regularly; we suggest bookmarking this page! Please contact [FPQC@usf.edu](mailto:FPQC@usf.edu) about any issues of questions about materials.

# PAIRED Initiative Tool Box

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- FPQC PAIRED Tool Kit and Data Resources
- Encouraging Family Participation in Early SSC
- Culturally Sensitive Environment for SSC
- Consulting Families and Revising Policies
- Competency Training on Skin to Skin Care
- PAIRED Plus Resources

<http://www.fpqc.org/PAIRED/toolbox>

*NOW IT'S YOUR TURN!*



*QUESTIONS?*