

Transitioning from the neonatal intensive care unit (NICU) to home can be overwhelming for families. Social, environmental, economic, and mental health challenges all impact NICU discharge readiness. A lack of parental emotional comfort and confidence can inhibit learning and contribute to poor infant outcomes and increased healthcare utilization after discharge. Quality discharge preparation ensures that families feel ready to continue their infant's care at home. Comprehensive neonatal intensive care includes multidisciplinary, family-centered transition, and discharge guidelines to optimize readiness and outcomes.

WHAT WAS HOMEWARD BOUND?

- Launched in January 2024, Homeward Bound was FPQC's largest infant initiative to date, with 48 Level II-IV NICU units participating.
- The initiative used evidence-based materials and best practices, outlined in the recently published national interdisciplinary guidelines on NICU discharge preparation & transition planning (Smith et al., 2022).
- Homeward Bound integrated caregivers into a Family-Centered discharge process that began on admission & empowered families to collaborate with the clinical interdisciplinary team through their baby's transition from NICU admission to discharge.

Family-Centered Care was a universal component of every driver and activity within the Homeward Bound Initiative



KEY DRIVERS AND AIMS

Homeward Bound promoted the successful discharge and transition of the NICU baby to home by focusing on:

Family Engagement and Preparedness

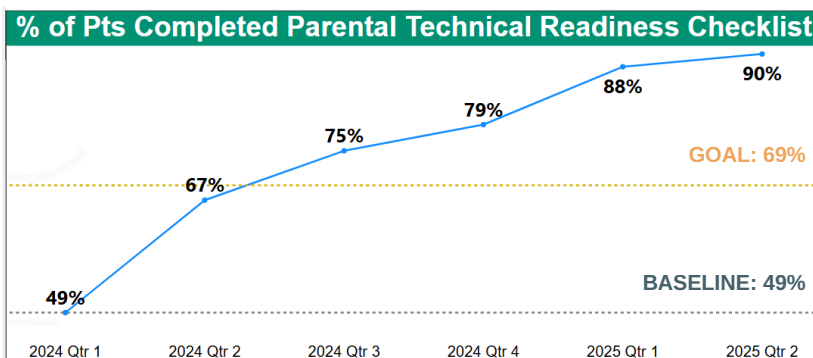
Health-Related Social Needs

Transfer and Coordination of Care

Primary Aim: Achieve a 20% increase in NICU discharge readiness by ensuring parents complete all required education, training, and bedside practice (technical readiness checklist) and by assessing their confidence and emotional readiness through a short questionnaire.

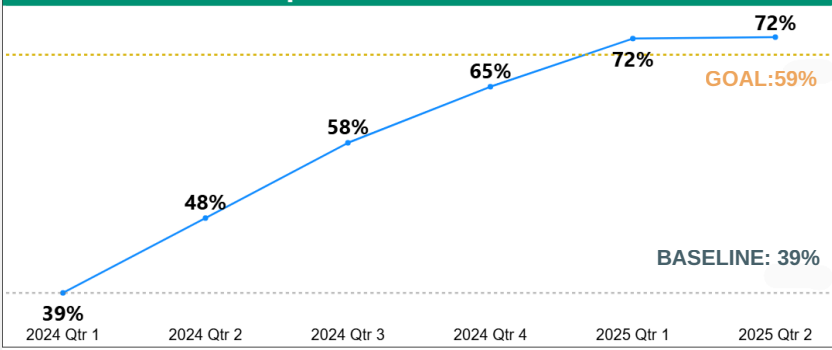
Secondary Aim: Increase by 20% the completion of a discharge process tool upon discharge home.

ACHIEVING THE AIMS



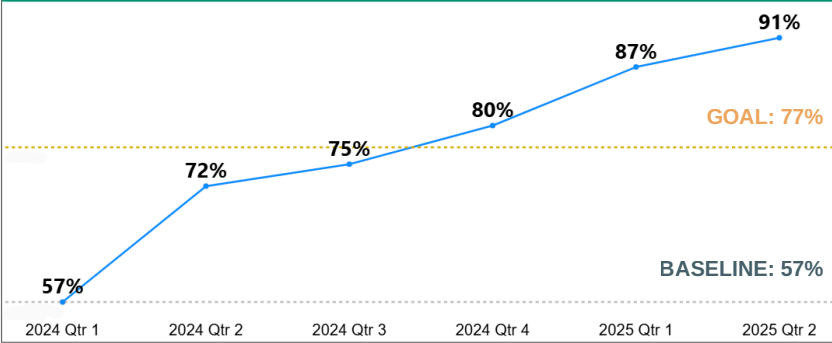
The parental technical readiness checklist captured whether families had completed all required education, training, and bedside practices before their baby's discharge. Each element could only be marked complete once parents demonstrated the skill through teach-back, ensuring they were prepared to provide care at home. Over the course of the initiative, completion of this checklist **increased by 84%**.

% of Parents w/ Completed Emotional Readiness Assessment



The Emotional Readiness Assessment evaluated parental readiness attitudes and skills in bringing home their child. The rate of parents taking the emotional readiness assessment **increased by 85%**. Out of the parents that took the test, 96% of them felt well prepared to take their infant home.

% of Pts w/ Discharge Planning Tools Completed



The discharge planning tool was created to help parents understand the journey their child needed before they were ready to be sent home. There was a **60% increase** in patients who had completed discharge planning tools by the end of the initiative.

OTHER MEASURES CRUCIAL TO HOMEWARD BOUND SUCCESS

CREATE A PATIENT SPECIFIC CARE PLAN FOR EACH FAMILY **47%**

CREATE A LIST OF PEDIATRICIANS WHO CAN MANAGE NICU BABIES **65%**

CALL PARENTS OF PATIENTS WITHIN 3 DAYS OF DISCHARGE **62%**

INTEGRATE THE HEALTH-RELATED SOCIAL NEEDS FROM MATERNITY UNITS **62%**

OVERVIEW

65%

FL NICUs participating in the initiative

83%

Hospitals received at least 4 stars for meeting initiative goals and expectations

97%

Parental Emotional Readiness Assessments completed

60%

Hospitals engaged in sustainability phase



Florida Perinatal Quality Collaborative

FPQC.org/homeward-bound
Email FPQC@usf.edu for more information