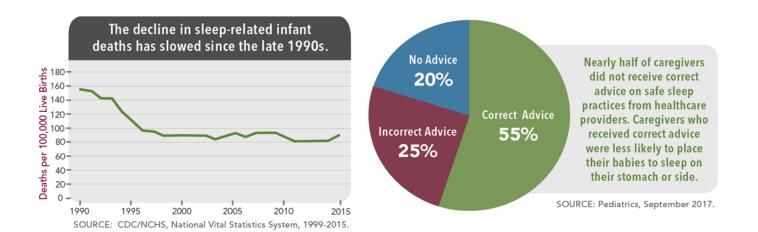


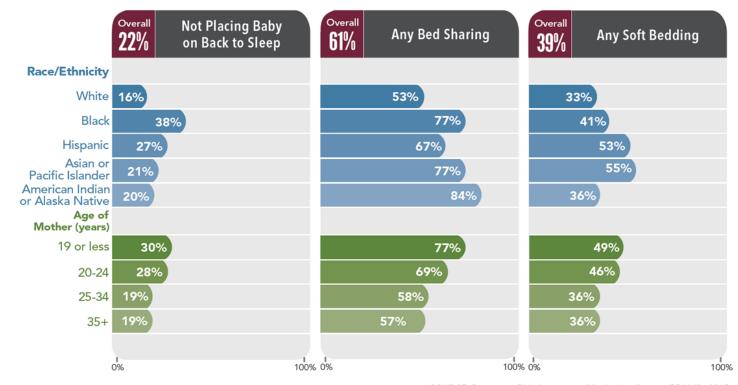
National and State Data





National Data

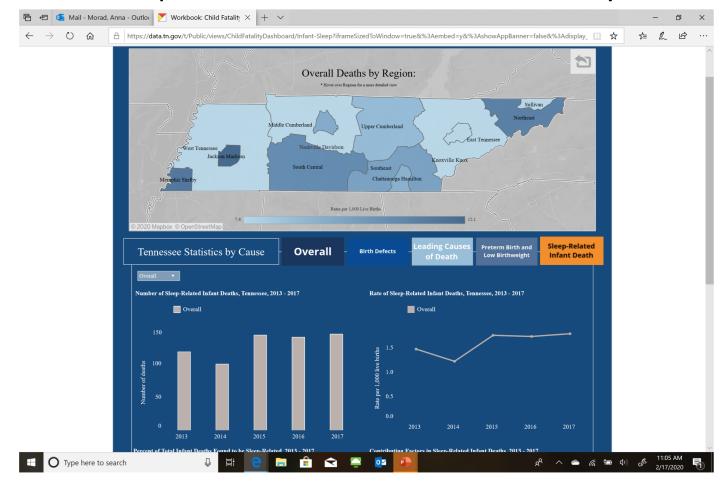
UNSAFE SLEEP PRACTICES WITH BABIES ARE COMMON.





Tennessee Data

Tennessee Department of Health Infant Mortality Dashboard



 https://data.tn.gov/t/Public/views/ChildFatalityDashboard/Infant-Sleep?iframeSizedToWindow=true&%3Aembed=y&%3AshowAppBanner=false&%3Adisplay count=no&%3AshowVizHome=no&%3Aorigin=viz share link&%3Atabs=no&%3Atoolbar=no



Project Overview



State Project Leaders

- Anna Morad, MD TIPQC Infant Medical Director
- Courtney Gutman, MD Project Medical Director
- Theresa Scott data support
- Operations Team Brenda Barker, TIPQC Executive Director
 Patti Scott, Infant QI Specialist



Safe to Sleep: Global Project Aim

Increase Safe Sleep compliance in the hospital setting by 10% by March 2021 for infants 0-12 months of age.



Metric Level Aims

- Hospitals will develop and implement safe sleep policies in compliance with AAP guidelines. Policies will include guidelines for care in the newborn nursery and Special Care Nursery/Newborn Intensive Care Unit, as appropriate.
- Participating hospitals will train 100% of staff members who provide care to newborns.
- Hospitals will provide and document safe sleep education for all families admitted to participating units with 90% compliance.
- Hospitals will perform and document safe sleep audits monthly (preferable on the same day and time each month and under the care of different caregivers).



TIPQC: SAFE TO SLEEP

KEY DRIVER DIAGRAM

STRATEGIES PROJECT AIM PRIMARY DRIVERS Develop a policy (based on the Follow the AAP Increase Safe Sleep AAP guidelines) inclusive of all recommendations for safe sleep Compliance in the hospital areas that provide care to hospital setting by newborns guidelines. 10% by March 2021 Staff Education – physicians, for infants 0-12 nurses, respiratory therapy, and months of age. other members of the Develop/provide education to all healthcare team staff providing care to newborns Parent/Caregiver Education Develop/provide education to all parents as part of their routine and discharge teaching **Environmental Management** (proper supplies available to Complete a minimum of 10 crib staff and families) audits every month - review carefully the "noncompliant" audits for trends and develop strategies to address



Where Are We....

- 12 teams have joined or indicated that they will be joining (forming teams, gathering resources, policy, plan for audits)
- Project population: Newborn Nurseries or Neonatal Intensive Care Units
- Resources for teams:
 - National Association of Neonatal Nurses (NANN) Safe Sleep Resource
 - AAP 2016 Recommendations in the tool kit
 - TN DOH resources
 – Safe sleep webpage

https://www.tn.gov/health/health-program-areas/fhw/vipp/safe-sleep.html



Where Are We.....



- Data collection starts in June
 - Redcap used for data collection and to review graphic results
 - Each team will complete their own PDSA cycles
 - Educational interventions, crib cards, parent involvement, rounding tools, etc
 - Recurring team meetings at the facility to review progress
 - Troubleshooting, barriers, challenges, wins



Meetings

- Monthly huddles and statewide meetings
 - Huddles:
 - Review Redcap data for all teams
 - Share successes and challenges
 - Collaborative brainstorming
 - Discuss any literature updates
 - QI training
 - 1st Tuesday of each month (2nd huddle June 2)
 - Statewide Meetings:
 - Learning Session in July









Monthly Leadership Report

Safe to Sleep Facility Name, Month and Year

Charter

Team Members

Lessons Learned / Anecdotes

Changes

Proposed (P), Tested (T), Implemented (I)

Graphs of Measure

Senior Role / Recommendations / Next Steps

Parent Involvement

1

2

5

5

(Share examples of parent involvement)

3

IHI Rating Scale

.

3

4

4

(Adapted from IHI)

Tool Kit



Tool Kit Contents

Document

Introduction

Summary of the Evidence

Quality Improvement Overview

Model for Quality Improvement

Project Checklist

Project AIMS and Measures

Definitions

Guidelines for Safe Sleep

Safe Sleep in the NICU

Appendices:

- A Key Driver Diagram
- B Safe Sleep Audit Tool
- C Suggestions for Completing the Monthly Audit
- O D Additional Resources

References



Data and Measures



Safe Sleep Audit Tool



TIPQC SAFE SLEEP MONTHLY AUDITS

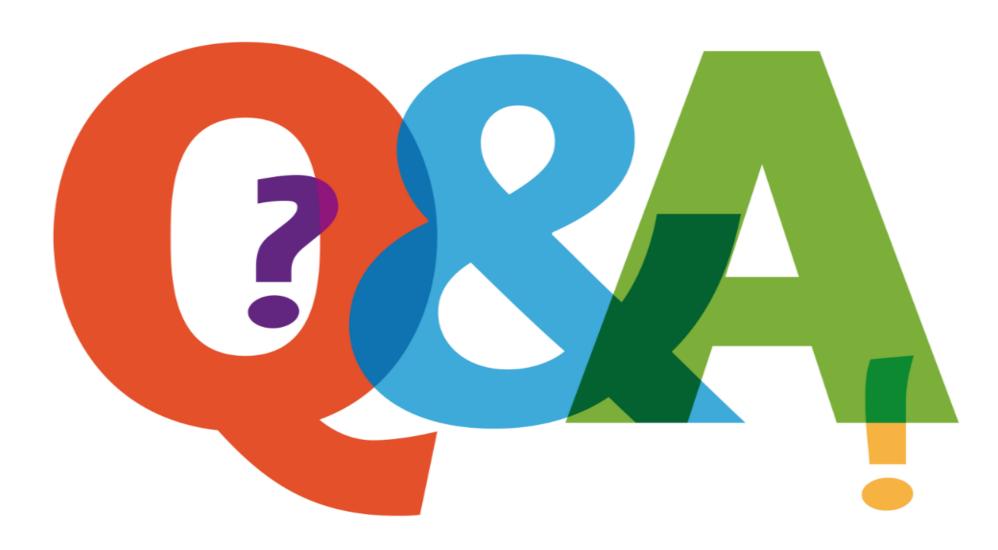
Audit guidelines:

- Audits should be conducted monthly, preferably on the same day and time each month.
- Complete 10 audits for infants in your unit that are eligible for safe sleep. This includes infants rooming-in with their parent(s).
- Infants excluded from this audit include those <32 weeks gestation and/or medically unstable.

Date of Audit: _____ Time of Audit: ____ Auditor: ____

- The selection of eligible infants to audit should be as random as possible. Fitting the audits into your existing workflow is also recommended.
- If there are fewer than 10 eligible infants to audit, audit all eligible infants available across multiple consecutive days until 10 audits are reached.
- If you have a NICU, you may also complete 10 audits for infants in your NICU that are eligible for safe sleep. If you do, please complete a separate audit sheet.

Γ					If not compliant, why? (check all that apply)							If not compliant,	
							Unsafe	Additional				was non-	
		Infant					bedding	objects				compliance	
		Location:	Is infant				with	in crib				addressed	
		Newborn	compliant			Posi-	thick or	including	Bed	Infant un-		with caregiver	
		Nursery (NN) /	with the			tioning	excess or	toys,	sharing	attended		(physician,	Notes /
		NICU (NI) /	Safe Sleep	Infant	1	devices		washcloth,	while	while		nurse, parent)	Comments
1	Audit	I	recommen-		of bed	being	swaddled	or burp	parent	asleep		at time of	(Additional space
L	No.	Room (PR)	dations?	supine	elevated	used	blankets	cloth, etc	asleep	not in crib	Other, please specify	audit?	available on back)
	1	NN / NI / PR	N / Y									N / Y	
	2	NN / NI / PR	N / Y									N / Y	
	3	NN / NI / PR	N / Y									N / Y	
	4	NN / NI / PR	N / Y									N / Y	
	5	NN / NI / PR	N / Y									N / Y	
	6	NN / NI / PR	N / Y									N / Y	
	7	NN / NI / PR	N / Y									N / Y	
	8	NN / NI / PR	N / Y									N / Y	
	9	NN / NI / PR	N / Y									N / Y	
	10	NN / NI / PR	N / Y									N / Y	







• We would love to have you!

Contact Brenda Barker, Executive Director at Brenda.barker@vumc.org





Special Thanks to Our Partners













ALLIANCE FOR INNOVATION

