

Nursing Education Research Conference 2018 (NERC18)

NICU Nurses and Families Partnering to Provide Family-Centered Care

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The aim of this evidence based practice (EBP) project was to determine how implementing the seven neuroprotective core measures of family centered developmental care will impact the satisfaction of the NICU nurses through new knowledge, skills and families through partnering with care compared to traditional care. According to the American Academy of Pediatrics (AAP) Committee on Hospital Care and Institute for Family Centered Care policy statement made in 2003 family centered care is a method in which medical care is grounded in the principle that optimal health outcomes are accomplished when patients' family members participate in an active role in contributing emotional, social and developmental support (American Academy of Pediatrics, 2003).

In order to accomplish this, NICU nurses needed a firm understanding of the developmental problems associated with the high risk and the premature infant. It was critical that this group of caregivers understands the fundamentals of neurosensory growth of these infants. It is also vital that they understand how the intrauterine environment protects the infant from being exposed to the fluctuation of an unstable extrauterine environment.

The Phillip's Neonatal Integrative Developmental Care Model was the model that we used for implementation. The seven neuroprotective core measure for family-centered developmental care identified are: the healing environment, partnering with families, positioning and handling, minimizing stress and pain, safeguarding sleep, protecting skin and optimizing nutrition. This model is represented by the lotus flower. In the center, the first core measure is healing environment. Each of the remaining six core measures are depicted as overlapping petals to display the integrative nature of developmental care (Altimier & Phillips, 2013) (Phillips, 2015).

The goal of the unit was to empower families by partnering with them to develop proper skills in caring for their infant (Westrup, 2007) positively impacting their stress level, comfort level and confidence as well as increasing family satisfaction (Cooper, Gooding, Gallagher, Sternesky, Ledsky & Berns, 2007). The goals of the NICU nurses were to gain new knowledge, skills and increased nurse satisfaction by providing developmental care using the seven core measures of neuroprotective family centered care for every infant every time (Cardin, Rens, Stewart, Danner-Bowman, McCarley & Kopsas, 2015).

The NICU staff was educated on the "Seven Core Measures of Family-Centered Developmental Care" by providing educational materials and hands on training with a developmental care specialist. After completion of the training the neuroprotective interventions were implemented on every NICU infant. Parents were give verbal and printed information and educated on the meaning of family centered care.

Conclusion from pre and post surveys that were collected from our NICU nurses showed an increase in knowledge of the appropriate care and potential benefits of these interventions. Pre and post Press-Ganey reports were collected from parents and results showed an increase in satisfaction over most categories. Also the results from parents during discharge phone calls surveys showed NICU families had a strong satisfaction with the partnering of care and the level of family centered care their infant received. With these results it is essential for NICU nurses to provide developmental care using the seven

core measures of neuroprotective family centered care as the standard of care for every infant and family that walks through the NICU doors (McGrath, Samra, Kenner, 2011).

Title:

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Keywords:

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References:

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Abstract Summary:

The NICU staff was educated on the “Seven Core Measures of Neuroprotective Family-Centered Developmental Care” by lecture, printed education and hands on training with a developmental care specialist. Upon Completion neuroprotective interventions were implemented on every NICU infant. Parents were education on family center care through verbal and printed information.

Content Outline:

I. NICU nurses and families partnering in infants' care

A. AAP definition of family centered care

B. Seven neuprotective core measures of family centered developmental care

C. Satisfaction of NICU nurses and families

II. Understanding of developmental problems in the premature infant

A. Fundamentals of neurosensory growth

B. Unstable extrauterine environment

II. Phillips' Neonatal Intergrative Developmental Care Model

A. Seven neuroprotective core measures

1. Healing environment

2. Partnering with families

3. Positioning and handling

4. Safeguarding sleep

5. Protecting skin and optimizing nutrition

IV. Goals

A. NICU nurses

1. Gain new knowledge and skills

2. Increase satisfaction

B. Empower families of NICU infants

1. Positively impact stress level, comfort level and confidence

2. Increase satisfaction

V. Education

A. NICU nurses

1. Educational materials

2. Hands on training with a developmental care specialist

B. Families of NICU infants

1. Verbal education by NICU nurses

2. Printed information given as handouts

V. Conclusion

- A. Pre and post surveys from NICU nurses show increase in knowledge and satisfaction
- B. Pre and post Press-Ganey reports show increase in family satisfaction
- C. Discharge phone call surveys to NICU families show strong satisfaction with family centered

First Primary Presenting Author

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Professional Experience: I have worked in NICU since 1990. I have been the educator for NICU since 2009. I educate nurses NRP, incompetencies, Code drills with Baby HAL, CPR, and I work with the ER to educate them on code drills for infants. I also teach parents infant CPR.

Author Summary: She has worked in the NICU for over 26 years is the supervisor, charge nurses and helps in the education of NICU nurses: NRP, CRP, STABLE, NICU competencies, teaches NICU classes for the versant resident. She also serves in the community as a car seat technician. She is the chair of the EBP and research committee, helping and being the lead with EBP/R projects, a member of the Nursing recognition and development committee and numerous other committees.

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Professional Experience: 2006-present -- Charge nurse, Texas Health Hurst Euless Bedford Hospital Neonatal Intensive Care Unit, Bedford, TX. Family-Centered Care Project Leader (2016-current) Responsible for creating and implementing an evidence based practice project to improve family-centered care in our unit. NICU Developmental Care Team Member (2011-current) Responsible for research and education of NICU nurses on developmental care techniques and developmental care products available on our unit. Presented several in-services on different aspects of developmental care to NICU staff. NICU preceptor since 2008. Current member/chair holder of multiple councils and committees.

Author Summary: She is charge nurse of a 16-bed Level III Neonatal Intensive Care Unit, serves on multiple councils and team lead for several on-going projects in her hospital.

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Professional Experience: 2003-present—Charge nurse, Neonatal Intensive Care Unit at Texas Health Resources Hurst Eulless Bedford Hospital, Bedford Texas. Co-author for the Family Centered Care Project, which included research and education for all NICU nurses about developmental care techniques and new products to use in our unit. 2013-present-- Lead for the Baby Friendly Hospital Committee. This includes reporting monthly data and maintaining our accreditation as a Baby Friendly Hospital. 2013-2015-- Unit Based Council chair, helping the unit to facilitate changes and improvements in the unit. 2013-2015-- hospital wide Shared Governance chair and co-chair, as the Shared Governance chair and co-chair I was assigned to be the THR HEB delegate at Texas Health Resources Nursing Congress. 2005-present-- Versant preceptor to new nurses and new hires.

Author Summary: Lori has been a nurse for 23 years with most of that time being spent in the Neonatal ICU. She is charge nurse and attends all high risk deliveries. She reports monthly data on breast feeding to keep our Baby Friendly accreditation. She also played an instrumental role in making standard wearable blankets for all babies at Texas Heath Resources HEB.