

Improvement Palooza 2023 Conversation Circle #2

Team Restoration, Revelation, and Relationships

September 13, 2023

Welcome & Goals

Ashwini Lakshmanan, MD, MS, MPH, FAAP, Associate
Professor, Department of Health Systems Science, Kaiser
Permanente Bernard J. Tyson School of Medicine

Courtney Breault, MSN, RN, CPHQ

Associate Director of Quality at California Perinatal Quality Care
Collaborative (CPQCC)



Goals

- Review **NICU-specific data** on family advisory councils and spiritual care services
- Identify ways to **boost up** NICU staff and family members (morale, culture, identity, spirituality)
- Learn about how **NICU family members** feel seen, valued, and supported
- Explore the role of a **hospital chaplain**, their touchpoints with NICU staff and family members, responsibility for equity and care, strengths and gaps, and cultural expertise
- Explore the role of a **palliative care provider**, their touchpoints with NICU staff and family members, and opportunities for team restoration
- Discover **gaps** in culture, identity, and spirituality in the NICU

Agenda

TIME	TOPIC	SPEAKER
12:00p	Welcome & Goals 5 min	Ashwini Lakshmanan, MD, MS, MPH, Associate Professor, Department of Health Systems Science, Kaiser Permanente Bernard J. Tyson School of Medicine
12:05p	Team Restoration Topic Areas 5 min	Ashwini Lakshmanan, MD, MS, MPH, Associate Professor, Department of Health Systems Science, Kaiser Permanente Bernard J. Tyson School of Medicine
12:10p	CPQCC Family Advisory Council (FAC) Members' Experience in the NICU 15 min	Silvia Bor, MA, Marine Program Manager with WildAid and CPQCC FAC member Nishan Degnarain, MPA, MS, Founder of Breakthrough Ocean Ventures and CPQCC FAC member
12:25p	UCSF Perinatal and Pediatric Chaplain Role and Support to the NICU 15 min	Jess Easter, M.Div, BCC, LC, Perinatal and Pediatric Staff Chaplain, Spiritual Care Services UCSF Medical Center and UCSF Benioff Children's Hospitals
12:40p	Kaiser Permanente Downey Palliative Care Program and Support to the NICU 15 min	Ambrisha Joshi, MD, Pediatric Palliative Care Team Physician Co-Lead, Department of Pediatrics, Neonatologist, Department of Neonatal-Perinatal Medicine, Peer Supporter, Downey Cares Program, Kaiser Permanente Downey Medical Center
12:55p	Q&A Panel Discussion 30 min	Moderated by Valencia P. Walker, MD, MPH, Vice Dean of Health Equity and Inclusion, Geisinger Commonwealth School of Medicine
1:25p	CPQCC QI Collaboratives & Wrap Up 5 min	Ashwini Lakshmanan, MD, MS, MPH, Associate Professor, Department of Health Systems Science, Kaiser Permanente Bernard J. Tyson School of Medicine

Continuing Education (CE) Credit for RNs



Perinatal Advisory Council:
Leadership, Advocacy and Consultation

- CE credits have been approved for the **live attendance of today's session for RNs**
- The Perinatal Advisory Council: Leadership, Advocacy and Consultation (PAC/LAC) is an approved provider by the California Board of Registered Nursing Provider CEP 5862
- Please contact Courtney Breault (courtney@cpqcc.org) regarding any questions related to the RN-CE credits, grievances, or in order to request accommodations for disabilities

**STEP
ONE**

SIGN IN

Please chat in your name to sign into today's session

**STEP
TWO**

EVALUATION

A QR code and link will be provided at the end of the live session

As part of this session, we will emphasize the need for culturally and linguistically appropriate care of neonates and their families.

IP2023 Conversation Circle Padlet



A screenshot of a Padlet board titled "Improvement Palooza ('IP2023') Conversation Circle #2: Team Restoration, Revelation, and Relationships". The board contains seven discussion cards, each with a question and an "Add comment" button. The questions are: "Welcome to the IP2023 Conversation Circle #2 Padlet! Happy to have you here. Feel free to say hello in the comments.", "Thank you for sharing some info with us when you registered for today's session! Here is a roundup of where we are.", "What attributes do you value most in a professional team/relationship?", "List your top 2-3 strengths you feel you can contribute to a team?", "What are ways you can identify team members who may feel like they don't belong? How can you make your team more inclusive?", "What do you plan to bring to your team after attending today's session? What are ways you can raise each other up?", and "What are your interactions with chaplains at your NICU?". The interface includes a search bar, a share button, and a settings menu on the right side.

Please share on our IP2023 Conversation Circle Padlet:

<https://padlet.com/CPQCC/IP2023CC2>



NICU Specific Data

Family advisory councils and spiritual care services

NICU Specific Data

Family advisory councils

VON Members Report Increased Family Involvement in the NICU

Ten principles of family-centered care were created in 1992 to:



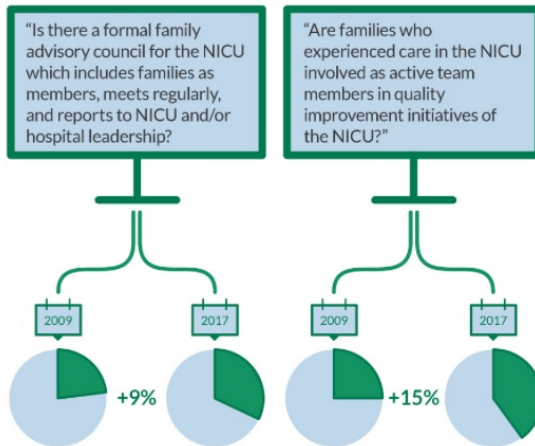
Encourage families to participate fully in caring for and making decisions for their newborns

Help caregivers respect the diversity of family values and beliefs



Help parents and professionals form mutually beneficial and supportive partnerships in the NICU and beyond

VON asks two questions on an Annual Member Survey to measure family involvement:



There is much more our community of practice can do to involve families. VON supports teams working to increase family involvement by:



Involving paid family advisors and parent volunteers in VON quality improvement programs

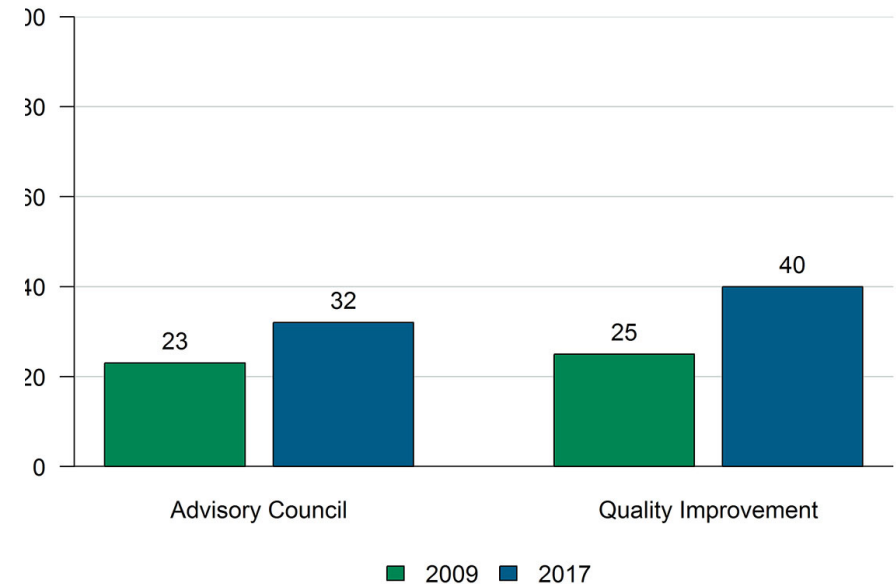
Integrating parents into VON's Annual Quality Congress curriculum



Facilitating Experience-Based Co-Design, a QI methodology that develops improvement ideas in concert with families



Family Involvement in the NICU 2009-2017



This information is made possible by VON members who voluntarily contribute data in a global effort to improve the care of high risk newborns and their families. To see more, including commentary by Howard Cohen, MD, and Marybeth Fry, MEd, visit NICU by the Numbers online: <https://public.vtoxford.org/nicu-by-the-numbers/>.

NICU Specific Data Spiritual Care Services

Research Article

Volume 12 Issue 2 - December 2022
DOI: 10.19080/AJPN.2022.12.555889

Acad J Ped Neonatol

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Spiritual Care in the NICU from the Parents' Perspective: A Mixed Methods Study



Keren Genstler^{1*}, Alexis Barajas Terrones¹, Brittany Chow¹, Kristopher Roxas¹, John Tan¹, Barbara Couden Hernandez¹, Douglas Deming¹ and Chad Vercio^{1,2}

Results: Quantitative and qualitative data were collected from the caregivers and legal guardians of NICU patients in the form of 108 quantitative surveys and 16 qualitative interviews. Parents indicated openness to receiving spiritual care from various members of the medical team and did not have strong barriers to receiving various types of spiritual care, nor significant barriers to receiving spiritual care from those of differing faiths or spiritual beliefs.

Conclusion: Guardians typically expect spiritual care from chaplains, however this study demonstrates caregivers also appreciate spiritual care from other members of the healthcare team including their physician. This validates the importance of educating physicians in how to provide spiritual care for families in critical care settings.

Silvia Bor, MA, Marine Program Manager with
WildAid and CPQCC FAC member



First hold with Felix
July 2019



Nishan Degnarain, MPA, MS, Founder of
Breakthrough Ocean Ventures and CPQCC FAC
member



Cayden,
Vinaya and
Nishan

June 2020



Family today



Advocacy

NICU TALES: BORN IN THE AGE OF COVID

change.org
NICU Babies Need Both Their Parents

Forbes
What It's Like Having A Child In The NICU During Covid-19
Nishan Degnarain, Former Contributor @ Manufacturing
I cover innovation within the green/blue industrial revolution.

Forbes
Seven Ways Sound And Music Can Promote Healing In NICUs During Covid-19
Nishan Degnarain, Former Contributor @ Manufacturing
I cover innovation within the green/blue industrial revolution.

NEC SOCIETY
Building a World Without NICU

How the Pandemic Aggravates NICU Life
The Neonatal Intensive Care Unit (NICU) is not a place for parents. For parents whose child has a stay in the NICU, it is a time of mixed emotion – gratitude for the care, yet anxiety until the child is discharged.

Messages

- Clinical care was excellent - non clinical management is biggest driver of parent experience
- Partners have critical roles
- NICU babies need both parents

Wayma(r)king in the Wilderness

Jess Easter M.Div, BCC, LC
UCSF Benioff Children's Hospitals (West Bay)

Introduction

Pediatric Staff Chaplain at
the UCSF Benioff
Children's Hospitals
(West Bay)

I've been doing pediatric
chaplaincy for a little
under a decade



Originally from Chicago and
am privileged to serve the
SF Bay Area

Member of the Religious
Society of Friends
(Quaker)

The Role of the NICU Chaplain

Patients

- Soothing touch
- Social development in reading books or talking with baby
- Existential listening and processing

Families

- Assess for spiritual and/or emotional distress
- Collaborate with other support services in honoring milestones (term date birthdays, NICU “graduations”, end-of-life memory making, etc.)
- Existential listening and processing

Staff

- Ritual support (room blessings, debriefings, code lavender, etc.)
- Participation in ethics consultations
- Existential listening and processing

Cultural Humility

1

Definition: "...cultural humility is a process of openness, self-awareness, being egoless, and incorporating self-reflection and critique after willingly interacting with diverse individuals."

2

Openness: "possessing an attitude that is willing to explore new ideas."

3

Self-Awareness: "being aware of one's strengths, limitations, values, beliefs, behavior, and appearance to others."

4

Egoless: "one must enact a belief system of equal human rights and flatten any hierarchy or power differential."

5

Supportive Interaction: "intersections of existence among individuals that result in positive human exchanges."

6

Self-Reflection and Critique: "journey or endless process of continual reflection and refinement."

"Cultural Humility: A Concept Analysis". Cynthia Foronda, Diana-Lyn Baptiste, Maren M. Reinholdt, and Kevin Ousman. *Journal of Transcultural Nursing* 2015 27:3, 210-217

Strengths and Gaps

1

Strength

Chaplains are uniquely situated on the interdisciplinary team and able to offer a different perspective and consistency

2

Strength

Countercultural approach of chaplain can open doors of vulnerability and humility on the part of clinicians and family members in a highly medicalized setting

3

Gap

We do not operate as licensed mental health clinicians, so our support is limited. We can't assess and diagnose post-partum mood changes or other mental health conditions.

4

Gap

Much of our work is deeply collaborative, so we depend on the collegiality of co-workers. Less collegiality impacts efficacy of chaplain interventions.

Ambrisha Joshi, MD, Pediatric Palliative Care
Team Physician Co-Lead, Department of
Pediatrics, Neonatologist, Department of
Neonatal-Perinatal Medicine, Peer Supporter,
Downey Cares Program, Kaiser Permanente
Downey Medical Center





Kaiser Permanente Downey Medical Center

Pediatric Palliative Care Team



AGENDA

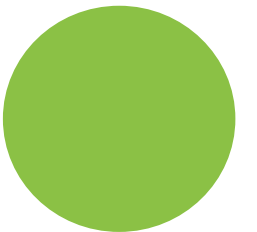


What is Pediatric Palliative Care?

PPC in the Pregnancy

PPC in the NICU

Team Wellness



WHAT IS PEDIATRIC PALLIATIVE CARE?

Pediatric palliative care is the relief of physical, social and spiritual suffering in children and their families

A multidisciplinary team whose goal is to provide consult services to pediatric patients and their families with a serious or potentially life-limiting condition, diagnosed either prenatally or postnatally



SERVICES



Goals of care conversations



Long term support and complex case management



Transition to home, access to home resources that are within goals



Supporting patient/family/care team throughout their journey





Memory-Building Starts At Pregnancy





Pregnancy



Neonatal Intensive Care Unit









Q&A Panel Discussion

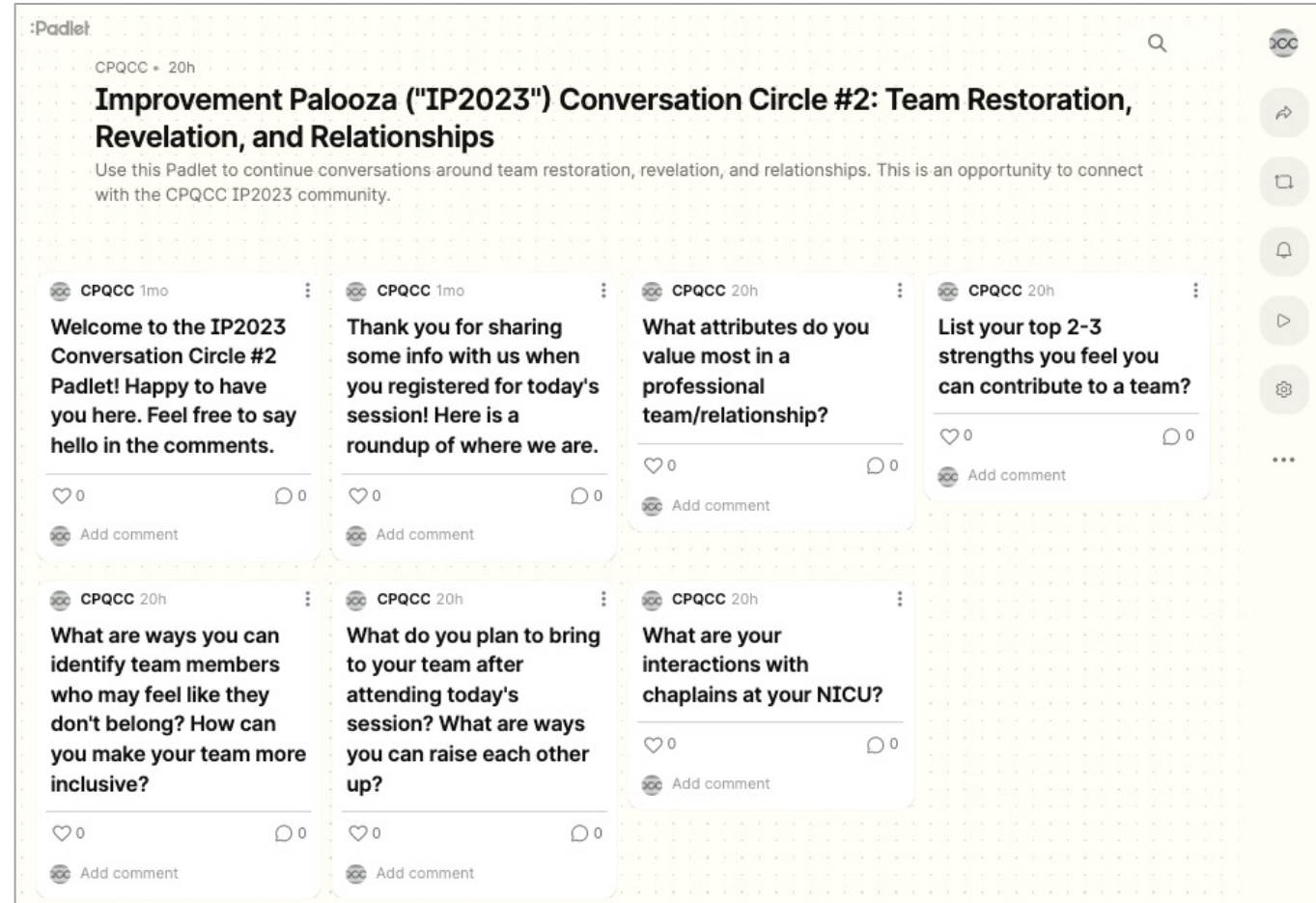
Moderated by Valencia P. Walker, MD, MPH,
Vice Dean of Health Equity and Inclusion,
Geisinger Commonwealth School of Medicine



Next Steps

IP2023 Conversation Circle Padlet

Please share your **key take aways** from today's session with all on our IP2023 Conversation Circle Padlet



<https://padlet.com/CPQCC/IP2023CC2>



Evaluation of Today's Session

- Please fill out an evaluation of today's session
- We'd like to hear feedback from all of you
- **For those requesting RN-CE credit, an evaluation is due by September 20**
- The Perinatal Advisory Council: Leadership, Advocacy and Consultation (PAC/LAC) is an approved provider by the California Board of Registered Nursing Provider CEP 5862
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Scan the QR code or click on the link provided in the chat to submit an evaluation of today's session. *Required for RN-CE credit.*

Continue the Conversation

Continue the conversation around this topic using Padlet. No account or sign in needed. Just go to the link, like or post a question, or read comments from others.

<https://padlet.com/CPQCC/IP2023CC2>

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