

Key Strategy Implementation: Getting to Green

Use this guide to support your Key Strategy implementation as well as determine the appropriate responses for quarterly data submission.

KEY STRATEGY	WORKING ON IT	IN PLACE
Establish Respectful Care practices during admission and survey caregivers on their experience before discharge	• Develop process flow • Plan a kickoff/grand rounds to educate clinical team and staff on RCPs • Gather sign-offs	RCPs are posted in patient rooms in the NICU and shared verbally with caregivers of each patient upon admission. All staff trained/ sign RC commitments for each patient.
Take steps to engage parents/caregivers to provide input on QI efforts	• Recruit caregiver/community representatives to join QI work • Develop clear ask and compensation plan • Navigate internal channels as necessary • Develop onboarding process	Patient representative has been identified and onboarded. Clear effort to engage parents/caregivers to provide input on quality improvement efforts.
Implement family-integrated patient rounding	• Include parents/caregivers as active participants during patient rounds. • Encourage families to share observations, concerns, and updates about the patient. • Collaborate with families when discussing the plan of care. • Invite caregiver questions and confirm understanding during rounds.	Standard practice is that caregivers are included in rounds, with active collaboration during all steps in an infant's care.
Standardize a process for implementing an individualized discharge planning tool upon admission	• Examine gaps and opportunities in current discharge procedures • Explore which resources you will hand out during admission and at discharge • Educate nurses on reviewing handouts in depth with patients	The planning tool is initiated with every patient upon admission. Handouts are reviewed and shared with caregivers at discharge. Clear, individualized discharge instructions are specific to each family and their needs.

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Facilitate coaching for caregivers on infant care	• Provide coaching to caregivers on essential infant care practices. • Demonstrate safe feeding, diapering, bathing, and soothing techniques. • Educate caregivers on infant sleep safety and daily routines.	One-on-one coaching is provided, specific to each infant's care needs before family is discharged from NICU stay.
Implement education for providers, nurses, and staff	• Explore educational offerings • Identify education coordinator • Communicate education requirements with providers, nurses, and staff, including the reasoning behind them	Completion of education requirements by providers, nurses, and staff is tracked monthly. Support the completion of additional related training around trauma-informed care and shared decision-making.
Implement NPREM Survey	• Engage facility staff to contribute to the development of the policy • Begin the process for internal policy approval • Post NPREM Survey flyers with QR codes in patient rooms.	Process flow in place to ask caregivers to complete survey before discharge to increase % completion. Review NPREM survey responses and share with team on a regular basis.
Standardize a process for PMH screening and referral	• Define a standardized PMH screening workflow • Establish clear referral criteria and pathways • Develop consistent screening and referral tools • Clarify roles and responsibilities across the care team • Track referrals and follow-up to ensure continuity of care	Standardized screening and referral criteria is established with clear referral pathways and team responsibilities defined. Screening and referral tools implemented and referral follow-up and tracking process established.