

# IPAC PEI 2017

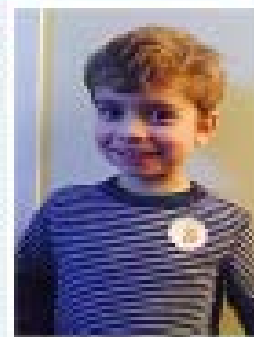
Jennifer Chadney  
SASKPIC Funding Recipient

September 15, 2017



## Utilizing Visual Cues and Engaging Families in the Sibling Health Screening Process

MARNEY HUNT, RN, BSN, ICP



## Background

### BC Women's Hospital Neonatal Intensive Care Unit

- 60 Beds
- Level II and III tertiary care

### NICU Philosophy

- Family Centered Care
- Family Visitation 24/7
- Siblings < 12 years complete the Sibling Health Screening (SHS) process



## What was the issue in our NICU?

- Existing Screening process not consistently done
- Siblings often slipped into the NICU without Screening
- SHS form required revised vaccine information



## Aim Statement: To increase compliance of Sibling Health Screening (SHS) to 100%

### Prevent transmission of communicable diseases

- o Respiratory viruses e.g RSV
- o Airborne viruses e.g chicken pox
  - clusters & outbreaks
  - cohorting & admission restrictions

What you need to know about RSV

### RSV Respiratory Syncytial Virus

RSV is a  
**R**really  
**S**erious  
**V**irus

**RSV MAKES IT HARD TO BREATHE**  
Infants with damaged or immature lungs are at the greatest risk for complications. RSV causes their lungs and even soft tissues to become inflamed, hard to breathe and can lead to a condition called bronchiolitis.

Protect babies and families this RSV season.  
Educate. Advocate. Integrate.

 Regional Perinatal

[www.westmeadhospital.com.au](http://www.westmeadhospital.com.au)

# Working group STRUCK!

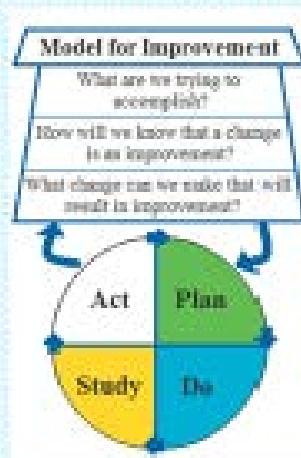
IPAC

Quality

Professional  
practice

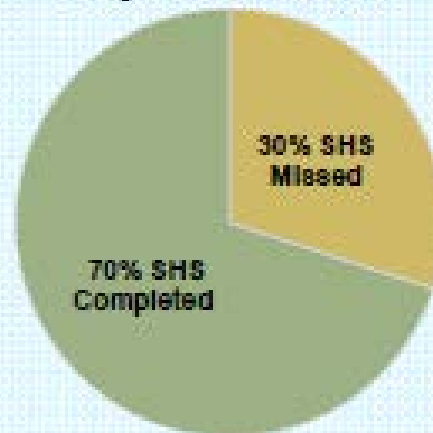
# Methodology: Model For Improvement

PDSA



## Baseline data

July 2016 SHS Audit





## Investigation



- conducted an environmental scan
- explored screening tools and processes with other IPAC teams and NICU's in B.C and Canada
- determined if staff were aware of significance of SHS

### Next steps...

- revised screening tool & questions
- developed process algorithms & signage
- created visual cues: "stickers of the day" for siblings to wear
- obtained feedback from the local IPAC team, frontline NICU staff, the parent advisory leader, and families - ? user friendly

## NEW process commenced October 2016

### First Visit

- RN does thorough Screen utilizing Forms
- Provides First Visit Education to Family on How to Complete Subsequent Screening
- Provides Education to Family regarding Hand Hygiene
- Provides Sticker for Siblings that are healthy with all vaccinations up-to-date.

### Subsequent Visits

- Family completes Screening page
- Unit clerk checks form - contacts RN if required
- RN confirms presence of Sticker when Sibling comes to bedside

## New tools created

### Wayfinding signage



## Screening location

### Guidelines





# Staff education



- NICU news letter
- huddles/1-1 feedback
- formal education days
- written standard work for RN's and unit clerks

# Standard work and algorithm

form located on back side of screening





## Sibling Health Screening (SHS)

### What are the Responsibilities of the Bedside Nurse in the NICU?

We assure that all siblings must complete the SHS **before** entering the NICU and display the "Sticker of the Day"

- ✓ On the first visit the SHS is to be completed by the bedside nurse/delegate with the parent at the NICU reception.
  - ✓ Provide sticker to sibling if no concerns.
  - ✓ During the first SHS the bedside nurse/delegate explain to parents how to complete subsequent screening and provide hand hygiene education.
- ✓ On all subsequent visits the parent must complete the screening at the desk and if no concerns noted the NICU provides the sibling with the "sticker of the day".
- ✓ If concerns are identified at any visit the DIL must be notified and if required the CP is notified.



Identify siblings who come to the bedside without a "Sticker Of The Day" and help the family complete the SHS

- ✓ Take the parent and sibling to NICU reception to complete the SHS.
- ✓ Provide sticker to sibling if no concerns.
- ✓ Advise the parents that the SHS process is required each day the sibling visits, and that hand hygiene is required.
- ✓ If concerns are identified during screening, notify the RN & Infection Prevention Control/Practitioner (IPC).



Completing the SHS prior to entering the NICU is critical to prevent infectious disease exposure to vulnerable infants

## Hand Hygiene education



- Visitor Hand Hygiene (HH) is an important factor in preventing infections
- HH education is part of patient safety and is an important part of accreditation



## NICU - Hand Hygiene





## Tools to support the new process... "Sticker of the day"



## Follow-up audit January 2017

60% of siblings were initially screened with stickers upon entering the nursery



Siblings who made it to the bedside **not wearing stickers**, TRIGGERED the nurse to take parents and sibling back to the front desk to be screened = 100% were completed!



Mission accomplished!

## Summary

- Gaps in SHS process were identified
- Key principles of the new process including the sticker of the day indicate screening is done



## Lessons learned

- ✓ Engagement of all stakeholders in a process is key to success
- ✓ Performing SHS engages families and helps facilitate IPAC education (e.g. HH, immunization schedules)
- ✓ IPAC-led group initiatives can be fun and improve patient safety



**THANK YOU!**