



NICU Family Centered Care Program in a Safety Net Hospital

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SANTA CLARA VALLEY
HEALTHCARE

THE POWER OF **We**

Santa Clara Valley Medical Center Family Centered Care Team

FCC Director

- Sangeeta Mallik

Family support specialists:

- Patty Mier
- Jennifer Godfrey
- Caitlin Evans

Family education specialist:

- Erin Saucedo

NICU Director

- Priya Jegatheesan

NICU Nurse Manager:

- Laura Berritto

Acknowledgements

We are grateful for the support of

- NICU families and infants at SCVMC, OCH, SLRH
- NICU and MCH staff at SCVMC, OCH, SLRH
- Family Centered Care team
- Valley Health Foundation
- First Five Santa Clara county
- March of Dimes



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Objectives

- Describe the Family Centered Care program at SCVMC
- Highlight how the FCC team is an integral part of NICU care and decision-making

What is a Safety Net Hospital

- Provides a significant level of care to low-income, uninsured, and vulnerable populations.
- Commitment to provide access to care for people with limited or no access to healthcare due to socio-economic circumstances, insurance status, or health conditions.



Santa Clara Valley Healthcare

- **Mission:** provide high quality accessible healthcare and service to all persons in Santa Clara County regardless of their social-economic status and ability to pay.
- **Better Health for All**
- 3 Hospitals and Clinics
 - Santa Clara Valley Medical Center (SCVMC) with level 4 NICU
 - O'Connor Hospital with level 3 NICU
 - St. Louise Regional hospital with newborn nursery
- 20-25% of county births, 4,500 deliveries annually

SCVMC NICU

- AAP Level IV, California regional NICU
 - 300-350 annual NICU admissions
 - 40 bed NICU
 - Six neonatologists, 5 NNPs, 15 pediatric hospitalists, >50 medical students and Stanford resident physicians
 - 90 nurses, >15 respiratory therapists, 1 Lactation Consultant, 5 physical therapists, 2 music therapists, 50 transports/year

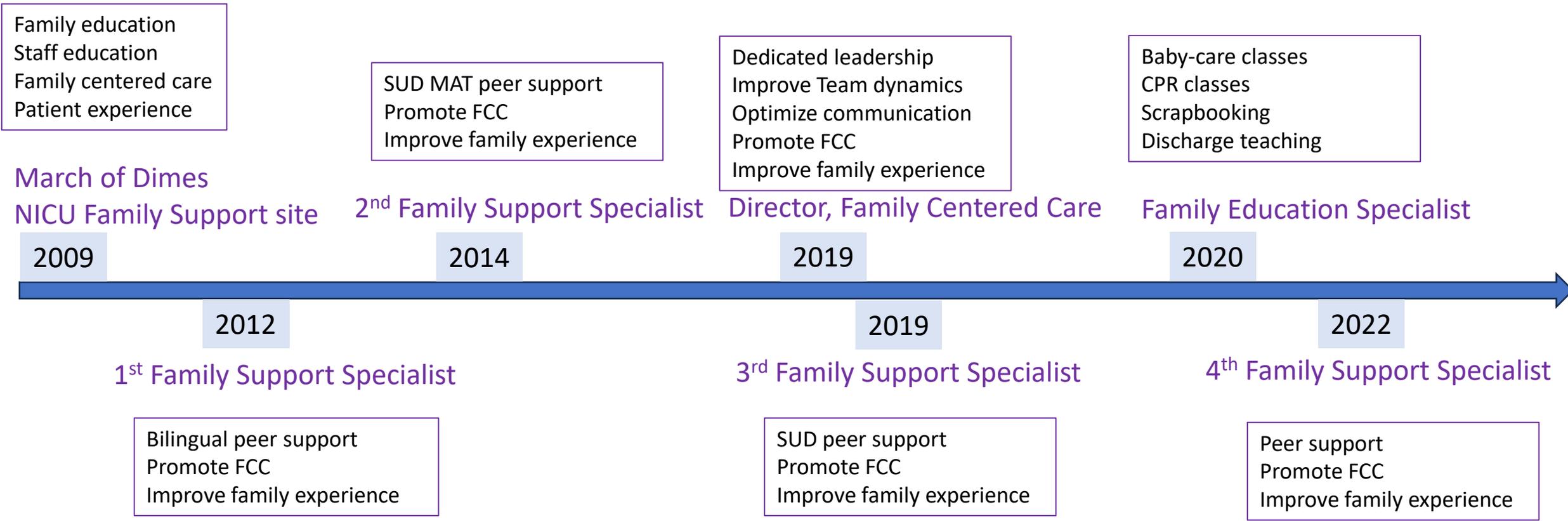
Family Centered Care in the NICU

- Parenting in the NICU
 - Parents actively participate in daily routine care
 - Increase positive touch and neuroprotective strategies
 - Parents are heard, understood, and recognized
- Shared decision-making model
 - Establish a partnership between family and the health care team
- Decrease in parental anxiety and stress levels in NICU and PTSD late
- Improve family experience during NICU stay
- Improve family long term outcome by early bonding and caring for their children

Goals of SCVMC NICU Family Centered Care

- Peer Support for all NICU families
- FCC team to reflect the patient population
- Paid positions
- Integrate FCC team as integral part of the NICU clinical team
- Secure sustainable funding

SCVMC Family Centered Care Timeline



Peer Support

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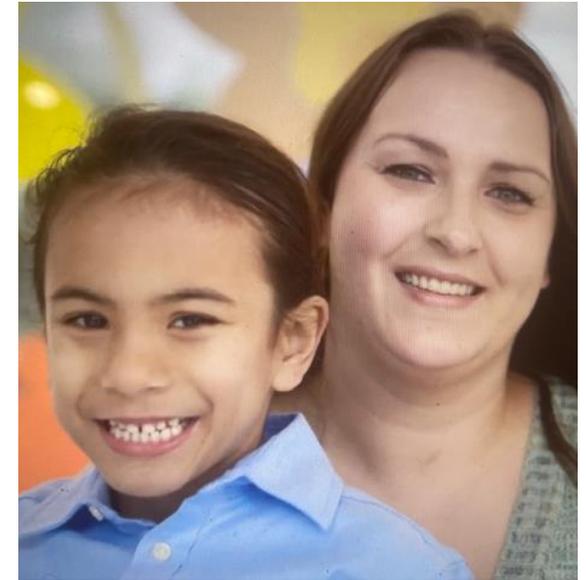
Family Support Specialists

- Hispanic NICU mother (bilingual)
- Baby girl was a 27 weeks preterm infant
- Experienced infant loss
- Strong advocate for herself and her family
- Patty Mier was hired in 2012 as our first FSS Specialist
- Breastfeeding experience
- Holding a mirror during skin to skin



Family Support Specialists to support mothers with substance use disorder

- Former NICU mother who had a 27 weeks preterm infant with history of substance use disorder (SUD) in recovery prior to delivery
- Provide support to other mothers with history of SUD
- Share experience with the recovery programs in our county
- Tour the residential programs for hesitant mothers
- Jennifer Godfrey was hired in 2019
- Follow up even after NICU stay



Family Support Specialists who advocates for maternal mental health support

- Former NICU mother
- Baby girl was a 24 week preterm infant in our NICU
- Strong advocate for maternal mental health support
- Caitlin Price Evans was hired in 2022 as a Family Support Specialist
- Kangaroo-a-thon, Skin to Skin brochure



Role of Family Support Specialists

Meet parents within 2-3 days of NICU admission

Self care packet and NICU stay booklet

Communicate with families in person / phone 1-2 times / week

Attend family conferences with medical team

Administer family satisfaction surveys

Be available for support for families when their infant is critically ill or dying

Stay in touch with families post discharge as needed

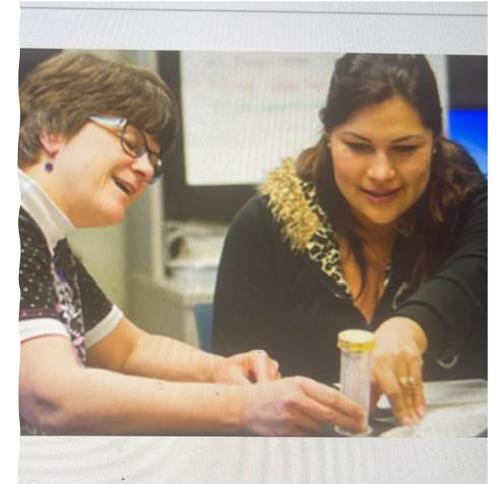
Director of Family Centered Care Program

- Role of the director is to ensure
 - Structured communication within the FCC team
 - Accountability of FCC team
 - Communication between FCC team and NICU staff
 - Dissemination of information to NICU staff
 - Expand the breadth of services offered both within and outside NICU
- Sangeeta Mallik is a Developmental Psychologist who has experienced infant loss at 23 weeks pregnancy joined the team in 2019



Family Education Specialist

- Education in a non stressful environment away from bedside
 - Baby Care classes
 - CPR training
 - Discharge teaching
 - Scrapbooking classes
- Activities to promote peer support environment
- Erin Saucedo, Former NICU nurse joined the team in 2020



Challenges during the COVID-19 pandemic

- FCC team could not meet families in person
- Visitation policies became much stricter in the NICU
- Translation support was not offered in person
- Scrapbooking classes were put on hold

FCC Team Transition during the Pandemic

- FCC team connected with family mostly via phone every week and once a week in person when non-essential workers were allowed.
- FCC team communicated changes in visitor's policy with families
- Advocated for phone / Ipad translation services for NELP families
- Onsite parent education classes held twice a week following social distancing guidelines with masking.

Family Experience

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Enrich Family Experience in the NICU

- Organize holiday family activities throughout the year
- Host Picnics
- Plan annual NICU reunions
- Offer weekly scrapbooking classes for families
- Wall of Hope
- Read-a-thons
- Kangaroo-a-thons





Holiday Social Activities For NICU Families







Mother's Day Tea Party





Valentine's Day Celebration



NICU picnic



Santa Clara Valley Healthcare's 2023 NICU Reunion

YOU'VE GOT A FRIEND IN ME

SATURDAY, AUGUST 26TH
11AM-2PM

CHANDLER TRIP SCHOOL
780 THORNTON WAY
(MAP TO EVENT AND PARKING ON REVERSE)

JOIN US FOR FOOD, GAMES, PRIZES, AND FUN!

NICU Reunion

NICU Scrapbooking





Remembrance
Day



Remembrance Day

Wall of Hope

Jazlyn Mier

Jazlyn Mier was born at 27 weeks gestation. During her first week of life, she was found to have bilateral grade IV intraventricular/intracranial hemorrhage. Some of the other challenges Jazlyn faced while in the NICU were apnea, chronic lung disease, jaundice, a PCA, hypertension, reflux and septicemia cultures. After a 100 day stay, we decided to bring Jazlyn home with a gastric tube due to poor suck - swallow coordination.

She was followed up by the hospital internists, nephrology and oncology. Jazlyn attended Early Start until her 3rd birthday.

She also received physical and occupational therapy until the age of 3. After turning 3 years old she began speech therapy with our local school district. Jazlyn was diagnosed with mild cerebral palsy at the age of 4. Despite all her challenges Jazlyn is developing in amazing ways. She is currently in second grade and is receiving speech and occupational therapy at school. In her spare time Jazlyn likes to read and play with her siblings.



 MARCH
OF DIMES

Wall of Hope


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VALLEY MEDICAL CENTER
Hospital & Clinics

Participation in NICU clinical and QI activities

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FCC Team as Clinical Partners

- Attend Clinical rounds and multidisciplinary team meeting
- Liaise regularly with NICU social worker
- Provide family feedback to medical staff regularly
- Patient satisfaction survey – collect data and share findings monthly with NICU staff
- “Voice of the NICU families”
- Supported staff in creating Skin to Skin brochures and conducting Read-a-thons and kangaroo-a-thons

FCC Team in Unit Improvement Activities

- Helped NICU staff address language barriers
- Helped address educational needs of families and NICU staff
- Established NICU Family advisory council
- Educate staff on appropriate way to communicate with and about families
- Emphasized the importance of daily provider updates

Voice of the Patient Panel

- Established a Voice of the Patient Panel in 2022 to engage NICU leadership and staff to raise awareness around the family experience in the NICU and help create a culture of respect for our families.
- Consisted of 3 former NICU family members that connected with FCC team over zoom calls
- Gave us feedback on how to address language barriers with NICU families
- Gave us feedback on how to support NICU families getting regular updates from providers

Staff Education

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NICU Staff Education

Informal education

- Remind clinical care team of trauma of NICU family experience.
- Advocate for non-English language preference families
- Health literacy appropriate education materials

Formal education

- Share educational videos on trauma informed care, family perspective, staff burnout
- Satisfaction survey reports

Community of Learning outside the institution

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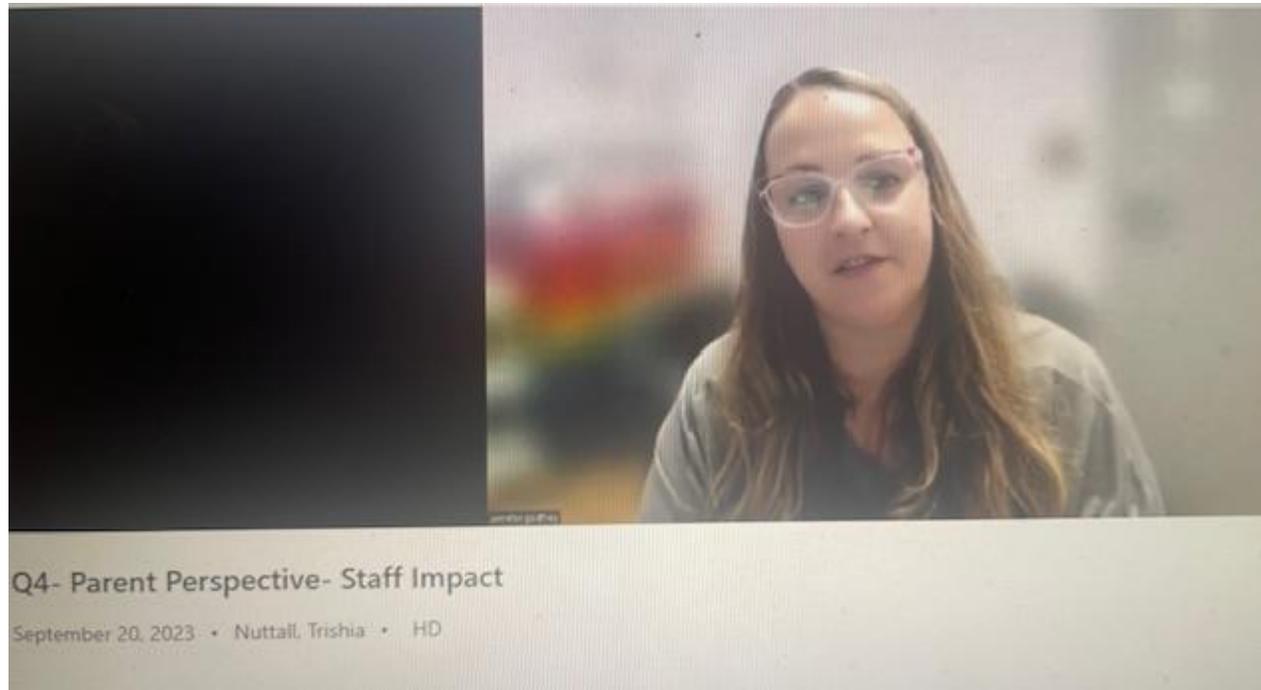
FCC Team Participation in Conferences and Meetings

- Travel with FCC members to conferences – VON, CAN, Gravens etc.
- Participate in state-wide collaboratives
- CPQCC FAC member
- FCC taskforce member
- Health equity CPQCC sub-committee member
 - Non-English language preference
 - Substance exposed

March of Dimes Grand Rounds

Breaking Barriers for Burnout: Strategies for Supporting NICU Staff

[Q4- Parent Perspective- Staff Impact.mp4 \(sharepoint.com\)](#)



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Caitlin Evans
Patty Mier
Jennifer Godfrey

Santa Clara Valley
Medical Center

FCC Team Training

- Customer service training
- Training as family advisory council member
- Training as Patient Family Partner

Funding Support

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Funding support

- March of Dimes NICU family support site grant application – 2007
- Funding for the first FSS – 2009 - non-profit organizations, annual renewals
- Added second FCC with funding for supporting substance exposed mothers and infants – 2014
- Expanded funding for FCC Director and a 3rd FSS – 2019 with focus on programmatic growth
- Additional funding for family education specialist - 2020

Data

Quarterly and annual data submission to funding agency

- Process measures – demographics report, NAS report
- Success stories
- Family satisfaction surveys

Data: Demographics Report

	A	B	C	D	E
1	Adult / Child	Ethnicity	Race	Zip code	Primary Language
2	Adult	Not Hispanic or Latino [1]	Pacific Islander	95209	English
3	Adult	Latin American [9]	Hispanic or Latino	95118	Spanish
4	Adult	Mexican [6]	Hispanic or Latino	95111	English
5	Adult	Mexican [6]	Hispanic or Latino	95116	English

Data: NAS Report – Process measures

Number of infants exposed to substances	38 (2.5 % of the population)
Number of substance-exposed NICU infants	22 (16.7% of the NICU population)
Average length of NICU stay for NAS infants	7 (n=1)
NICU infants who were treated for NAS with morphine	1
Substance exposed, % of those exposed	Methamphetamine 21 (55%) Opiates 17 (include 10 fentanyl, 45%) Cocaine 4 (11%) Marijuana 9 (24%) Suboxone/methadone MAT: 1 (3%) Polysubstance (including alcohol and tobacco): 10 (26%)

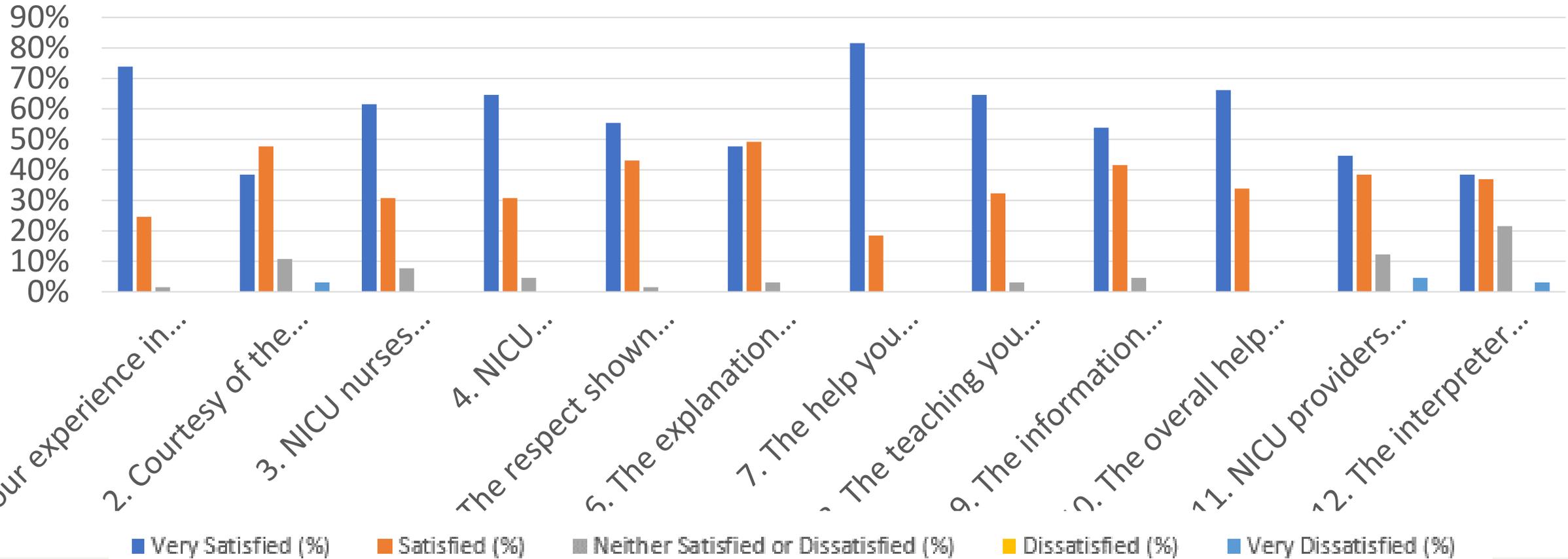
Data: Success Stories

- This past quarter, a NICU mother who delivered a 25-week-old baby and had a history of substance use disorder was coping with intense levels of stress when her baby was admitted into the NICU.

“After my experience at the emergency department at the other hospital, I felt rejected and traumatized. After talking with you, the nurses, and staff at this NICU I felt so much better.” ---quote from above parent to Family Support Specialist

Data: Family Satisfaction Survey

Post Discharge NICU Family Satisfaction Survey



Future Directions

- Working on creating a welcome video for our families
- Formalize FCC staff training
 - Lactation educator class
 - NICU peer mentor program training
- Converting the FCC team positions to coded/county hired from grant funded positions

Take Home Message

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Establishing FCC Program in a Safety-net NICU

- Peer support
- Leadership buy in
- Paid position with funding support and sustainable funding
- Program building with dedicated program director working on optimal communication
- Integration into the clinical team
 - “Voices of the NICU families” heard in NICU meetings
 - QI activity informed by families

Parting Quote from NICU family member

- *“The memories of this place (NICU) and what the staff did for me truly hit me 6 months after discharge when your baby is hitting their milestones and they are starting to become healthy. You look back and realize how much hope the NICU gave you. The stories that I heard from my Family Support Specialist and other mothers, and the encouragement that I received from the NICU staff was so profound when I got to the other side --- I realized how much they carried me through that time when I was in the NICU.”*

Jennifer Godfrey, former NICU mother and Family Support Specialist



THANK YOU!

Do you have any questions?

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