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May 4th, 11:30 AM - 1:30 PM

Outcomes of a Quality Improvement Project: Implementing Trauma Informed Care in a Neonatal Intensive Care Unit

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Implementing Trauma Informed Care in a NICU: Outcomes of a Quality Improvement Project

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Background

- The experience of being hospitalized in a NICU is recognized as a **traumatic stressor** to both the infants and their families.
- Physicians working in the NICU experience **indirect traumatization** and are at risk for **burnout**.
- TIC can increase effectiveness of healthcare delivery, ensure that staff, policies and procedures do not cause unintentional harm, promote staff **resilience**, and improve the overall **quality** of the patient experience.

Objective

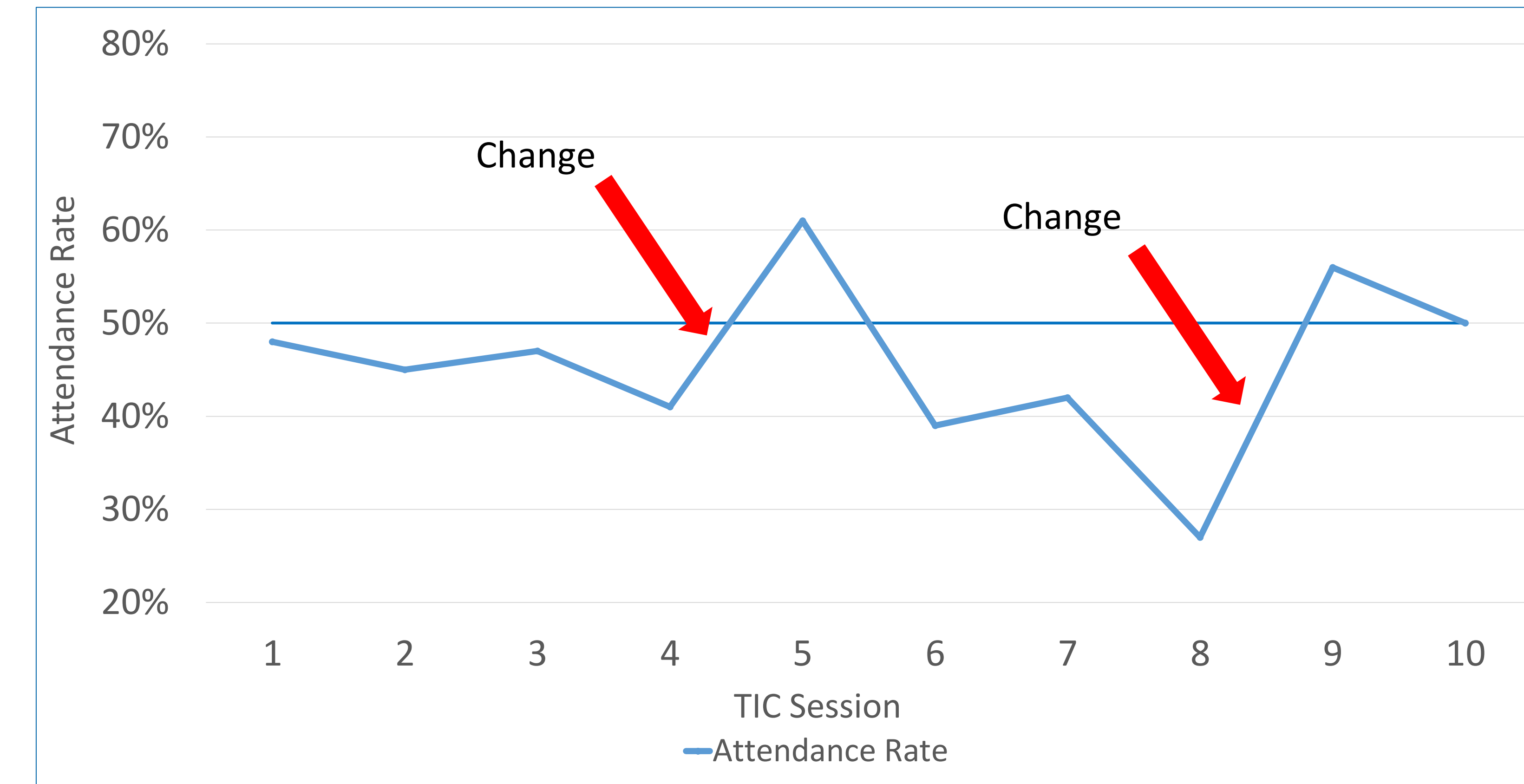
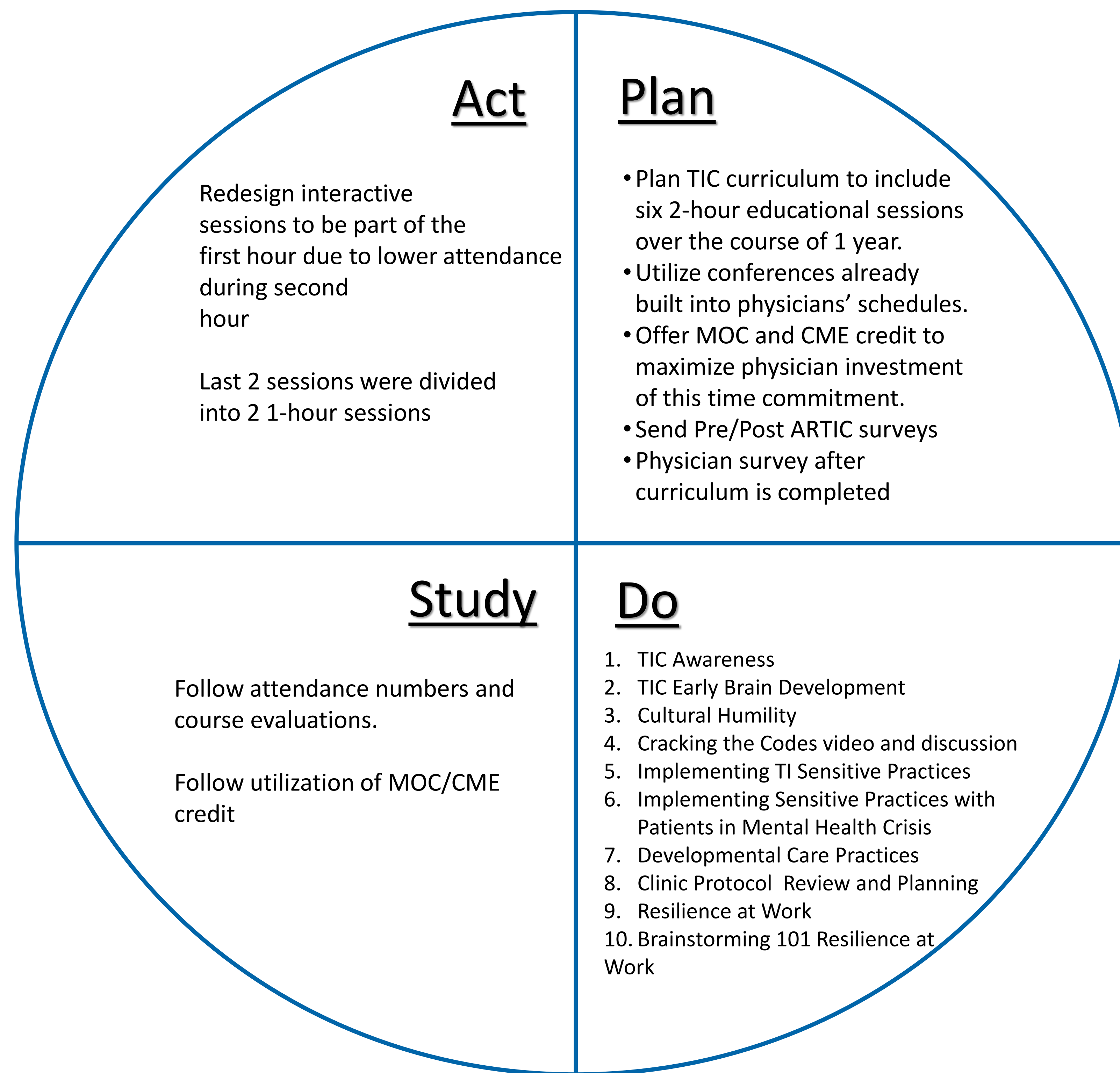
To evaluate physician **uptake** and **implementation** of TIC in a large Level IV NICU after providing comprehensive TIC education.

Design/Methods

- A NICU-specific TIC curriculum consisting of 10 one-hour sessions was developed and presented to Neonatology faculty and fellows at Children's Mercy Hospital (CMH) over a 10-month period.
- Physicians completed the Attitudes Related to Trauma-Informed Care (ARTIC) survey before and after receiving TIC education.
 - The ARTIC survey uses a bipolar Likert scale ranging 1 to 7 with higher scores being more favorable.
 - Evaluations were completed after each session.
- After completion of the curriculum, each physician was surveyed about implementation of TIC in their everyday practice.
- In addition, ARTIC pre-surveys completed by physicians at CMH were compared to physicians nationally who are part of the American Academy of Pediatrics Section on Neonatal Perinatal Medicine (SoNPM).

Break Down the Problem

- Physicians are often stretched thin for time. Asking physicians to allocate their time for TIC training is a big undertaking given the time commitment it requires.
- Not everyone feels compelled to attend this training series, especially those who do not recognize the potential benefits of TIC.



Results

- 37 physicians from CMH completed the ARTIC pre-survey with a mean score of 5.4 (SD 0.6).
- 267 physicians from SoNPM completed the ARTIC survey with a mean score of 5.6 (SD 0.6).
- 9 physicians from CMH completed the ARTIC post-survey with a mean score of 5.6 (SD 0.3).
- Evaluations addressing knowledge gained from each session scored an average of 4.4 (maximum score 5).
- 87% (27) of CMH physicians completed the survey about implementation of TIC into their everyday practice.
 - Of these, 93% (25) answered positively describing practice changes that incorporate trauma informed principles.
 - 7% (2) stated the education did not change the way they practiced, but provided evidence and structure to reinforce current practices.

Conclusions

- Providing comprehensive TIC education to physicians at a Level IV NICU is feasible and increased uptake and implementation of trauma informed practices.