

Making it Work: IDF™ Implementation

The Sanford Experience

Elizabeth Jeanson PT DPT DCS NTMC CNT
Developmental Specialist NICU
Sanford Children's Hospital

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Disclosures

- **No Relevant Financial Relationships**
- **No Relevant Nonfinancial Relationships**

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Elevator Speech - Administration

- The cost of care for infants born prematurely can be effected by many aspects of care. One aspect of care is how babies gain the coordination and efficiency for feeding.
- Feeding difficulties can lengthen stay and increase costs. The IDF™ model improves feeding efficiency by carefully monitoring and effectively intervening during feedings breast or bottle.
- IDF™ has been shown to improve feeding outcomes while at the same time reducing length of stay and cost of care.
- Although there is a financial investment to initiate the IDF™ program the payoff can be seen within one year of implementation and continue to produce returns long after the initial investment is completed.

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The Sanford Process: Time Line

Year One Discovery

- 6 months for administrative education and “Buy In” and funding source
- 6 months of excitement building

Year 2 Implementation & Celebration

Year 3 Follow up

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The Sanford Process: Implementation team

- Interdisciplinary
 - Speech Therapist, Developmental Specialist, MD, NNP, Nurse, Administrator, Pharmacist, Nutrition, EMR representative, Occupational Therapist
- Leadership and organization
 - Strong organizational skills
 - Strong motivational/energizing skills
 - Communication skills
 - Hold people accountable to deadlines
- Cadence of Change
 - Protected, consistent meet times
 - Homework and accountability
- Anticipate trouble spots
 - Naysayers & late adopters on committee

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Staff Education

- Waitzman and Ludwig 1 Day workshop (Now Dr Brown)
- Excitement builders
- Potty Ponders
- Staff lounge signs
- Bulletin boards
- Staff meetings
- Huddle
- Waitzman and Ludwig Webinar at department meeting
- Intro video
- On line training

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Tangibles

- Family Feeding Plan Write on/wipe off sign
- Nursing Resource Binder (Cheat sheet)
- MD/NNP resource (laminated cheat sheet)
- EMR changes (New feeding Flow sheet)
- Flip book reference
- Parent education handout

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Write On/Wipe off Feeding Choice Card

Family Feeding Plan

What is your feeding intent?

- Pumping for now, decide plan later
- Exclusive Breastfeeding
- Breastfeeding and bottle feeding
- Pump and bottle breast milk
- Bottle feeding formula

Do you have a bottle/nipple in mind to use?

- Yes, _____ (Brand)
- No

Date: _____

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Celebrations

- Kick off celebration
- Initiation – Online education available
- Early completer prizes
 - 25% staff completion party
 - 50% staff completion party
 - 75% staff completion party
 - 100% staff completion party
- Go Live
- Anniversary Celebration
- QI Scoreboard celebrations
- LOS changes



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Policing the Change

- One : One bedside review and support
- Interdisciplinary Team: weekly review of progress
- Resident education
- Precepting
- New staff orientation
- Old orders not available
- Additional ST availability
- Availability of Dr Brown Preemie nipple on the cart
- ST reviews feeding flowsheet every day

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Huddle Notes

- Feeding order status:
 - Non-nutritive breastfeed/Nuzzle
 - 72 hour protected breastfeeding
 - Demand feeds prescribed volume
 - Ad Lib Demand – remove NG
- Brief baby performance review:
 - Always needs pacing
 - Nipple
 - Stop cues

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Key Points

- To change the culture – everyone must be involved.
- Concentrated and Saturated!
- Administrative Buy In
- Whole NICU at the same time
- Strong leadership
- Celebrate – Keep a visible score card of success
- Don't start any other initiative while completing IDFTM implementation.

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Outcomes

- ✓ 100% of staff trained
- ✓ Video education now part of orientation
- ✓ ↓ NG use
- ✓ ↓ Cost of care (extension sets/NG tubes)
- ✓ ↑ Nurse satisfaction
- ✓ ↑ Number of feeds by parent
- ✓ ↓ LOS

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Reference

- Mc Chesney, C., Covey, S., and Huling, J. The 4 Disciplines of Execution. Free Press 2012.

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