Sustainable transition to family integrated care by de-implementing staff's professional centered care practices

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Learning objectives

1. Describe factors influencing on professionals' decisions to de-implement non-evidence-based practices.

2. Describe strategies on how to unlearn these practices.

3. Reflect what one can do differently in every day clinical practice to support sustainable implementation of FICare.

Photo Credit:
Turku University Hospital

De-implementation

- Professionals secure quality care by creating routines and practices

- Evidence-based practice is not only about implementing new evidence-based interventions

- Requires de-implementation of ineffective, unnecessary or even harmful practices
  - e.g., Any limitations for parents' presence in NICU

- Final decision often made by each health care professional
  - e.g., Do you invite parent to provide pain management for the infant or join medical rounds or stay overnight in the NICU?

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Influencing factors

- Health care professionals' values, professional role, status, fear of malpractice
  - e.g., hands on care, do not want to burden parents

- Patient preferences can ↓↑ de-implementation
  - e.g., knowledge about breastfeeding, beliefs about parents' role in hospital

- Outer context – social, political, geographical factors
  - e.g., private health insurance, government resource allocation for rebuilding of hospitals - single family rooms

Photo credit: Department of Paediatrics, Drammen hospital, Vestre Viken Hospital Trust

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- Inner context – social and physical environment of care context
  - e.g., transportations from Level 3 NICU to Level 2 NICU, couplet care
- Process – routine for managing changes
  - e.g., leadership's, staff's experience of change processes
- Level of evidence – is alternative practice available if needed?
  - e.g., Zero separation vs. is immediate skin-to-skin contact for very preterm infants safe?

Why Does De-implementation Matter When Implementing and Sustaining Ficare in Practice?
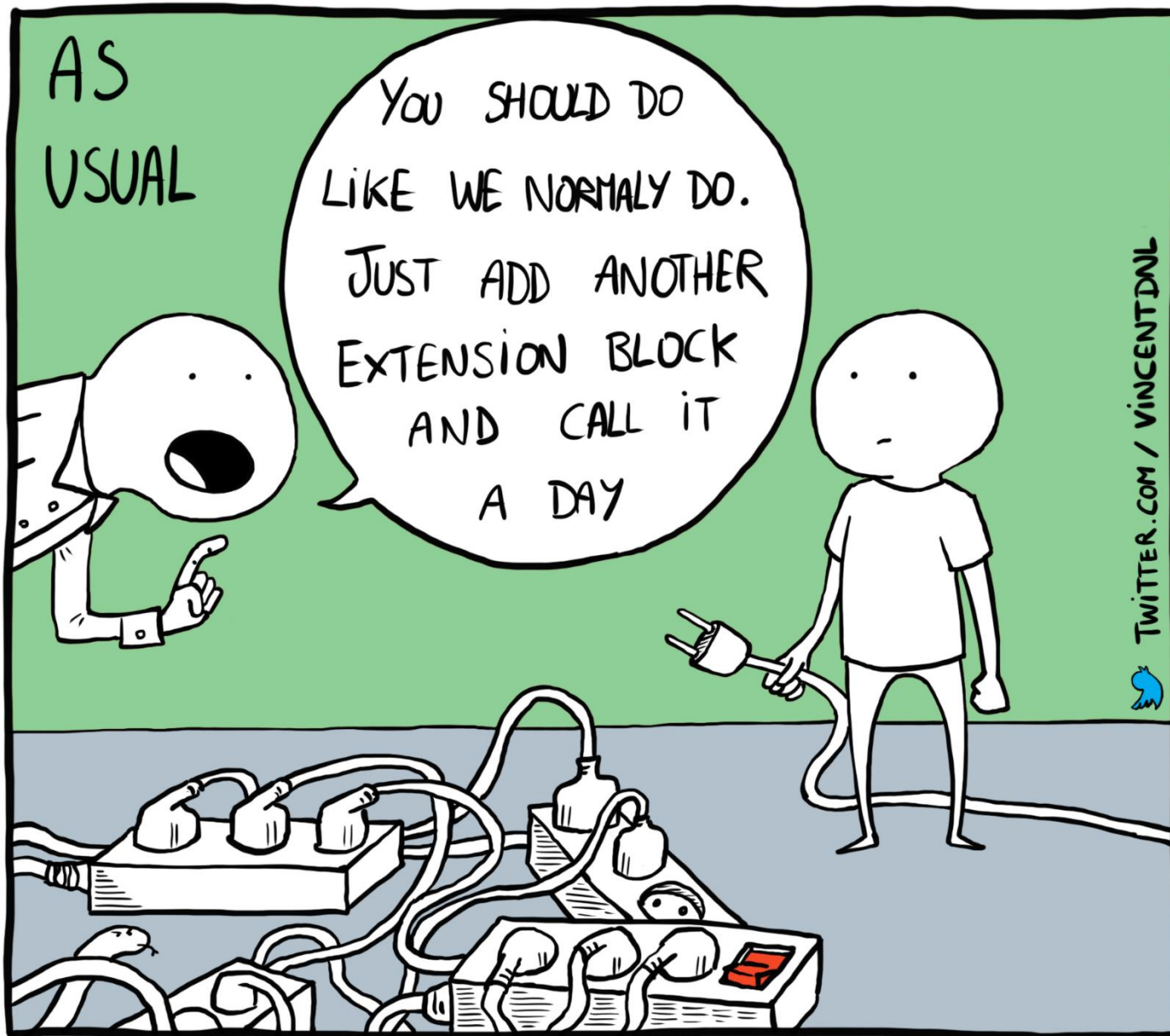
- ❖ We will consistently expend energy solving the problems that temporary workarounds produce

- ❖ We will not get to the heart of ineffective, unnecessary practice

- ❖ We will struggle to see quality improvement if essential problems are not identified

# An example of potential need for de-implementation

FICare

*"It is an actionable model by which parents are true partners in their infant's care, even when in the NICU. The goal of FICare is **to facilitate a partnership and collaboration** between parents and the NICU staff, to promote parent-infant interactions, and to build parent confidence."*

- Partnership: Mutuality & shared goals to secure infant well-being and optimal health
  - Requires shared responsibility, negotiation, parent autonomy and control & support of family
- Can not be achieved by teaching parents

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Teaching versus facilitation

- Nurse is subject expert and in control
- Knowledge transfer from nurse
- Desired outcome set by nurse

- Nurse is learner sensing and learning process expert
- Knowledge gained from parent's experience
- Outcome varies across parents and contexts

Teaching vs. facilitating
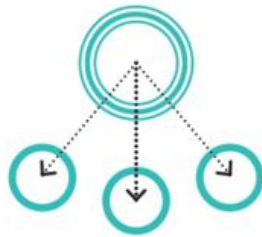
One directional dissemination of knowledge through a teacher

Accompanying and shaping a learning process together

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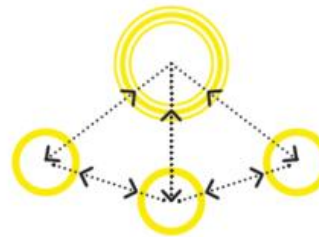
Why teaching?

- Traditional professional role
- Gives a sense of control, no fear of malpractice
- Parents often passive in a stressful situation
- Educational approach that many of us are familiar with

Why facilitation might be difficult?

- True dialogue requires attention
- Staff must truly value parents' experience, intuitive parenting
- Requires adaptation to different practices - parents have personal preferences - infant's wellbeing is the key

Teaching vs. facilitating
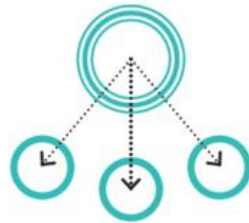
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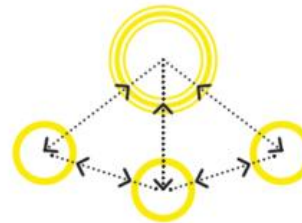
How to unlearn teaching?

- Identify teaching situations

- Reflect if you could choose facilitation instead of teaching

- Staff training on facilitation e.g., by experiential learning
  - Step back and let parent take care of the infant
  - Be interested in their observations
  - Ask right kind of questions – Prof. Benzies/Alberta FICare
  - Active listening, empathy
  - Conflict management

- Identify practices that need changing

- Assess if practice has changed e.g., feedback from parents

- Follow the sustainability of de-implementation of teaching and implementation of facilitation

Before adding anything to your practice, think if you can remove something.

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