

26th Annual Conference Poster Presentations

Poster presentations are original and pertain to completed clinical education, leadership change, or evidence-based practice projects related to women's health, obstetric and/or neonatal practice, education, or administration. Each poster has specific, individualized objectives and presenters will be available for questions and discussion.

Title: Developing an EBP standardized Newborn Fall Protocol

Brief Description: While newborn falls may be a rare event within the hospital setting, a newborn may sustain significant injury in a fall or if dropped. As our team reviewed a 2023 newborn fall, we also looked at other newborn falls across the Allina Health system in recent years to understand if there were commonalities or gaps that we could address to improve safety. In review, we identified that there was variation in follow up assessments with no standardized post fall plan of care to guide the pediatric provider or nurses in this high risk and very low frequency event. While there are ample interventions in place to prevent a newborn fall, there was a lack of guidance in optimal assessment and interventions post fall. This leads to variation in practice and a potential to have delayed recognition and response to any potential injury sustained during a newborn fall. Therefore, Abbott & United Mother Baby leaders, in partnership with our Newborn/Pediatric Provider leaders from Allina and Children's Hospital, completed a literature review and then evaluated various health system protocols. Next, this team jointly developed an Allina Newborn Falls standardized protocol and order set to ensure all assessments and interventions are following EBP to identify any injury for efficient interventions and treatment. Finally, education was developed to inform the care team.

Objectives:

- Verbalize the Joint Commission definition of a newborn fall or drop
- Describe how the implementation of a standardized EBP protocol can reduce practice variation
- Identify key nursing assessments and interventions in a newborn fall plan of care

References:

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Allina Health

Title: Implementing a Tiered Orientation Model

Brief Description: The Mother Baby Clinical Service Line at Allina health transitioned to a tiered orientation model in the fall of 2024. This evidence-based model supports orientee development by reducing the cognitive burden associated with traditional orientation programs. Gradually increasing responsibility for patient care and building from simple to complex skills increases orientee competence, confidence, role satisfaction, and retention of skills while reducing overall orientation length.

Objectives:

- Explain a tiered orientation framework
- State 3 benefits of a tiered orientation model
- Describe 3 resources created at Allina Health to support implementation of tiered orientation

References:

Beamer, J.C., Kromer, R.S., Jeffery, A.D. (2020). *Imagining an orientation built on trust*. Journal for Nurses in Professional Development, 36(1):2–6. <https://doi.org/10.1097/nnd.0000000000000602>

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Allina Health

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Title: Using a Fall Risk Tool for the Obstetric Population

Brief Description: Currently, all hospital inpatients are assessed for fall risk utilizing the Hendrich fall risk tool; a tool that was designed for acute care or rehabilitation patients. On the postpartum unit specifically, this tool has failed to identify patients who are post epidural, as an at-risk group, resulting in six falls on the postpartum unit over the course of 6 months. The PEFRAS (Post Epidural Fall Risk Assessment Score) was implemented over a three-month period on the postpartum unit during which time there were no patient falls.

Objectives:

- Identify the lack of an appropriate fall risk tool for the postpartum population
- Utilize an evidence-based tool to appropriately identify those at risk for falls post-epidural
- Implement interventions to decrease post-epidural falls.

Authors:

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Presenters:

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Megan Rice BSN, RNC, PHN; Postpartum RN at United Hospital, Allina Health

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Title: Implementing Massive Transfusion Drill in a Labor & Delivery Unit

Brief Description: Massive transfusion (MT) is relatively uncommon in obstetrics, but it can occur during emergent hemorrhage situations and is a lifesaving intervention. Because this is a low frequency, high risk situation, it is essential that labor and delivery (L&D) teams have a MT protocol in place and the opportunity to practice performance and team communication.

Objectives:

- Recognize the early initiation of Massive Transfusion (MT) order set facilitates faster availability of blood products in an emergency.
- Delineate roles during a MT emergency improves team communication and efficiency and decreases confusion.
- Implement unit drills for MT creates improved communication, teamwork and efficiency which leads to safer patient outcomes.

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Ann Logsdon, RN annetta.logsdon@allina.com Ann worked at The Family Birthing Center at Regina Hospital from 2005-2022, as a bedside nurse, charge nurse, preceptor, clinical educator, and NRP instructor. This unit encompassed all aspects of maternal cares, gestation of 20 weeks and greater through postpartum and newborn cares. She started working at The Mother Baby Center at United Hospital on Labor and Delivery in 2022, after the closing of the OB unit at Regina Hospital. Currently, she is working as a bedside nurse and has been actively involved as a Team STEPPS member running emergency OB drills on the unit, and just recently become the Co-Lead of the Team STEPPS Committee. Ann is an active member of the Unit Council for Mother Baby Center at United Hospital. She continues to teach NRP for United Mother Baby Center. She also continues to support Regina and River Falls Emergency Departments, instructing NRP and conducting emergency OB and newborn drills. Ann is also a facilitator of the OB Simulation Class for new employees across the Allina System.

Nancy Ingham, BSN, RNC-OB nancydolan.ingham@allina.com Nancy has worked in The Mother Baby Center at United Hospital since 1994, as a bedside nurse, charge nurse and Assistant Clinical Manager. She has been actively involved as a Team STEPPS member, running emergency OB drills in Labor & Delivery, Postpartum and the Emergency Department and is currently the Co-Lead of The Mother Baby Center Team STEPPS committee. Nancy has presented a poster on Team STEPPS at the AWHONN Conference in Atlanta in 2019. Nancy is a facilitator of the OB Simulation class for new employees at Abbott Northwestern.

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Title: Fetal & Infant Loss: Teaching caring & presence in an IPE pre-licensure simulation

Brief Description: Care during death and dying is a component of many health professions, yet often not included in educational programs. Collaboration between multiple professions is needed to meet the complex needs of families experiencing fetal/infant loss. This multi-phase, IPE simulation follows a family from death diagnosis, to the labor & delivery unit, and into a postpartum visit to help them navigate the loss of their term infant. Innovative debriefing models and simulation best practices are included.

Objectives: After viewing your poster, the learner should be able to...

- Recognize key moments in fetal loss experiences to provide trauma informed/human centered care.
- Identify interprofessional guidelines for the care of families experiencing fetal/infant loss.
- Integrate simulation best practices into death & dying educational content.

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