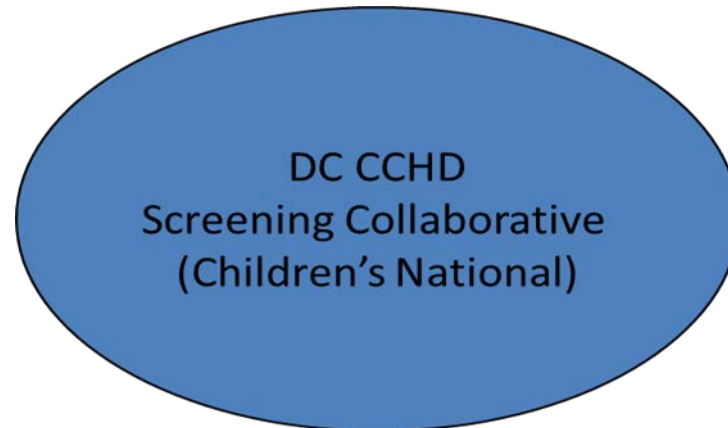
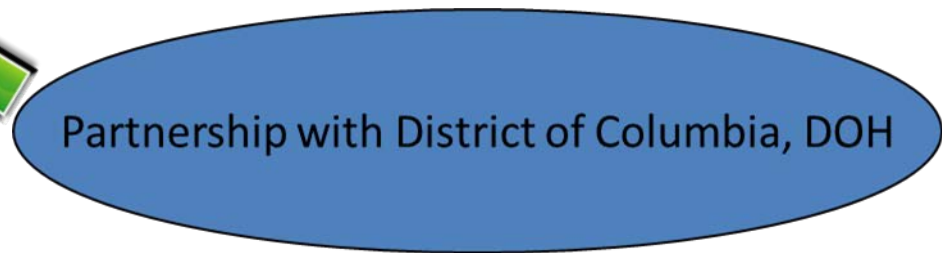


DC CCHD Screening Collaborative: January 2013 – December 2013



- Create Networks
- Plan Implementation
- Develop Guidelines
- Deliver Education
- Perform QA
- Develop F/U Plans
- Develop HIE Plan



Birthing Facilities

- Georgetown University
- GW University Hospital
- Howard University Hospital
- Providence Hospital
- Sibley Hospital
- Washington Hospital Center
- United Medical Center

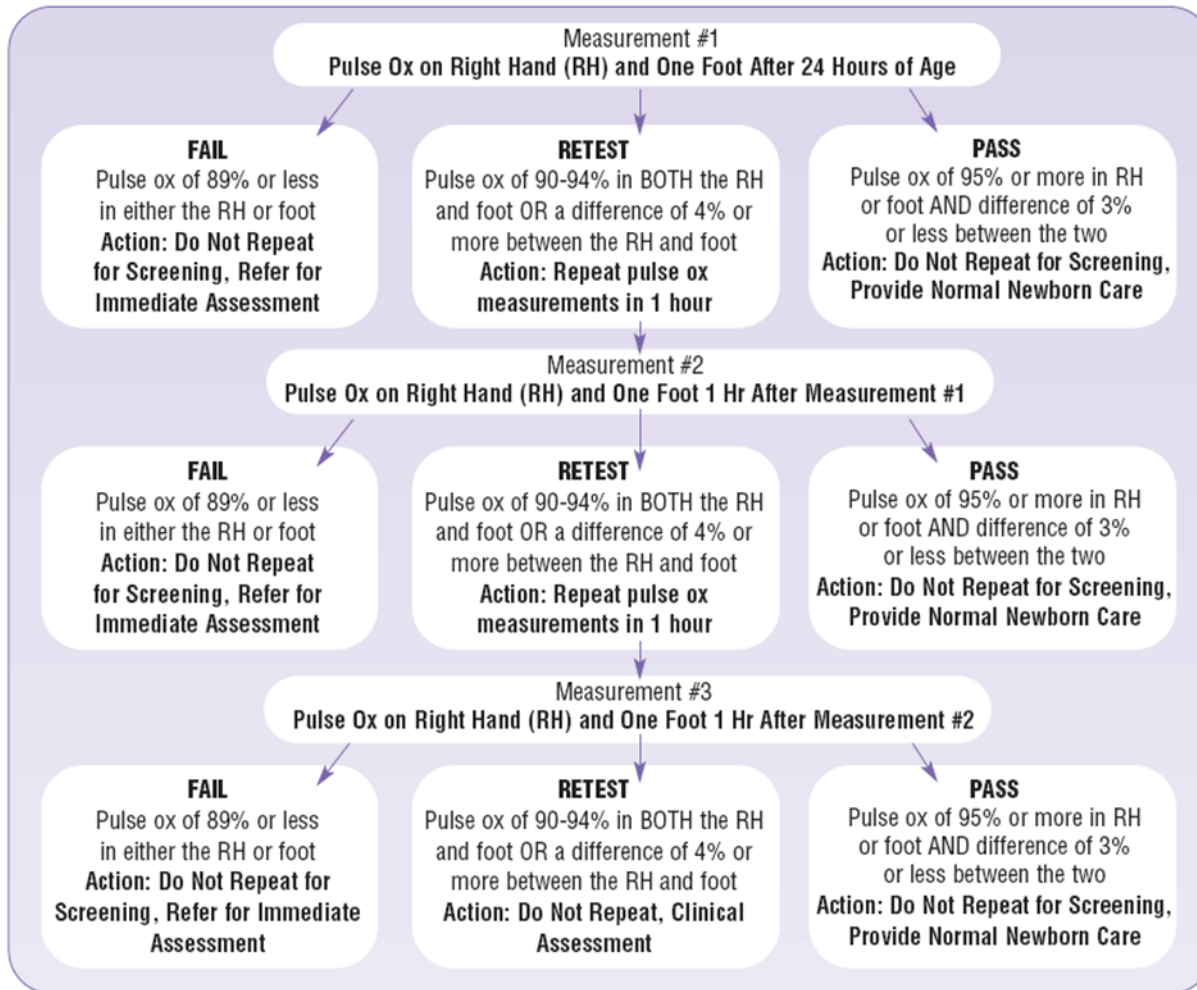


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Implementing a Standard Protocol



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The Toolkit

Toolkit Includes:

- Implementation Recommendations
- Screening Protocol
- Education for Families
- Competencies for Providers
- Advocacy Resources and Stories

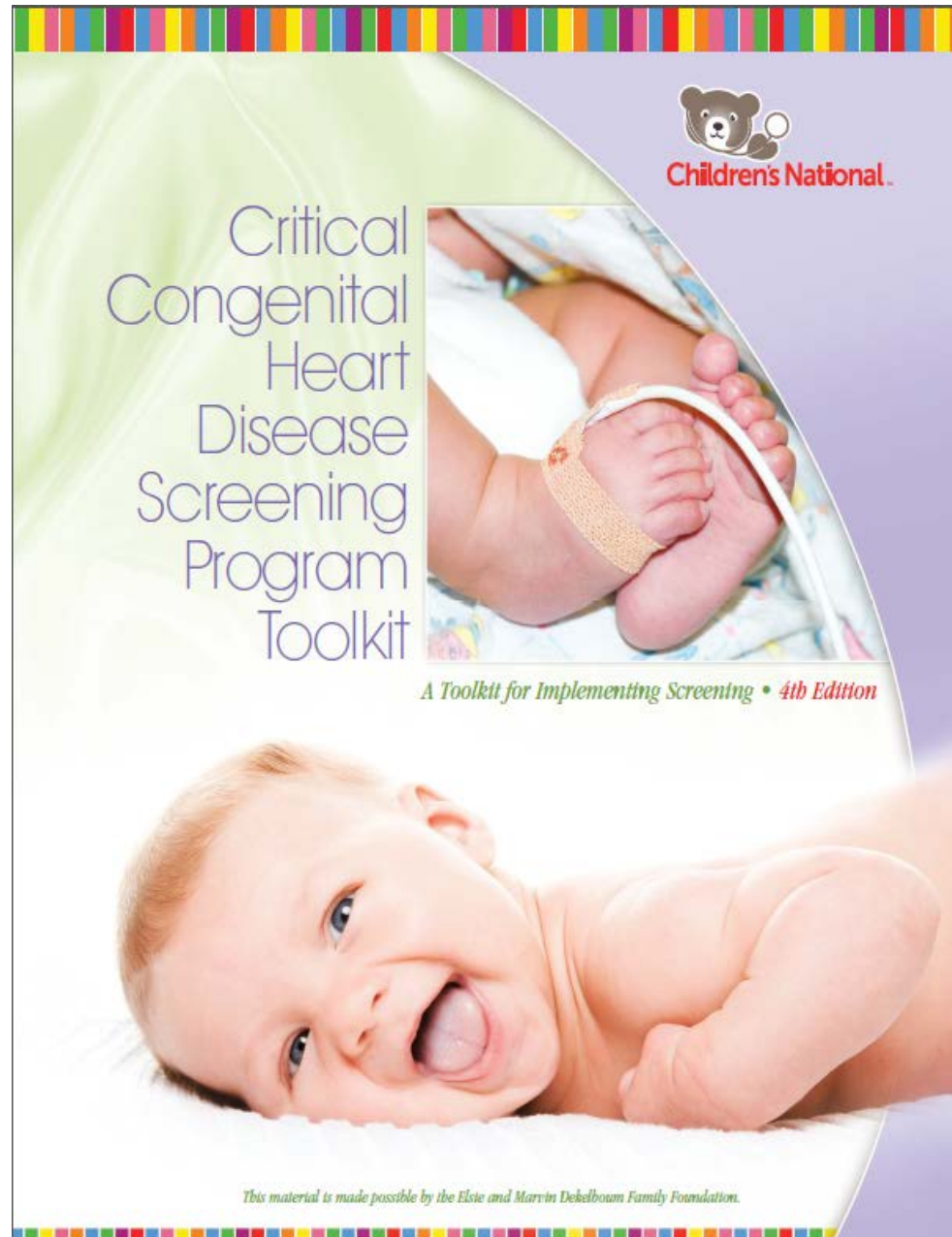
Over 1,200 Toolkits Requested
and Distributed Globally



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We know children.

Critical Congenital Heart Disease Screening Program Toolkit

A Toolkit for Implementing Screening • 3rd Edition

This material is made possible by the Eliza and Marvin DeBlouin Family Foundation and the National Outreach Education Program at Children's Hospital of Omaha.

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Children's National
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Children's National
Medical Center

In collaboration with Children's National
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Washington, DC 20002-2070

12/2012 2.1.5



REMEMBER ALGORITHM FOR SCREENERS

- Confirm that the infant is at least 24 hours of age and eligible for screening.
- Help the parent to warm and calm the infant in a quiet and peaceful environment.
- Describe the pulse ox test to the parent.
- Select a site on the right hand and one foot that is clean and dry.
- Place the pulse ox sensor and perform the pulse ox test.

ASSESSMENT OF BABIES WITH FAILING SATURATIONS

- Babies with saturation of 88% or less in RH or foot should have immediate assessment.
- Babies with Failing Saturations:
 - Clinical Assessment
 - Complete echocardiogram
 - Intestinal and Pulmonary pathology should be excluded
 - If symptomatic, referral to Pediatric Cardiology immediately
 - If asymptomatic referral to Pediatric Cardiology in timely manner

Program Overview

Newly Translated "Heart Smart" Videos

Pulse Ox for Providers

- English only

Pulse Ox for Parents:

- English
- Arabic
- Chinese
- French
- Russian
- Spanish



مرحبا
привет
¡hola
nǐ hǎo
bonjour

Available online at:

<http://www.youtube.com>

<http://www.babysfirsttest.com>

<http://vimeo.com>



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baby's
first test

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Creating Our Network: Key Concepts

- **Continuous data driven feedback loop**

Identify missing data prior to final analysis phase for improved data quality

- **All teach, all learn!**

Transparency in sharing outcomes & celebrating findings → leads to increased overall compliance

- **Quality improvement collaborative = different than formal research!**

Identified data remains at the individual center as Protected Health Information (PHI), DC Collaborative analyzes only de-identified data



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Measuring Success

Developing a data driven program to communicate our improvements through monthly iterative reports.

- Process and structure metrics
- Outcomes metrics
- Surveillance or balancing metrics

Monthly Team Sharing: Qualitative Data

Nursing Champions Monthly
Team Calls

(first Monday every month):



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Quality Assurance Measures

OZ Systems, data manager for demonstration project, performs technical QA on all individual results reported:

- Age at time of screen
(flagging babies who are screened prior to 24 hours of age)
- Correct interpretation of the result



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Using Data to Improve

Preductal O ₂ Saturation	Postductal O ₂ Saturation	Screen Date	User Interpretation	Age In Hours
100	99	7/12/13 2:45 AM	Technically Inadequate	22
96	98	7/14/13 2:10 AM	Technically Inadequate	21
100	99	7/18/13 3:50 PM	Technically Inadequate	23
100	99	7/23/13 12:15 AM	Technically Inadequate	14
100	95	8/31/13 2:15 AM	Pass	27
100	99	8/4/13 5:20 AM	Technically Inadequate	20
97	95	9/3/13 10:10 PM	Pass	24
97	98	9/10/13 1:20 AM	Pass	24
99	100	9/12/13 4:05 AM	Pass	24
99	98	9/16/13 4:55 AM	Pass	24



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