CASE STUDY

The Challenge

Delivering timely, consistent, and efficient new mother/baby education is a challenge to hospitals across the country. Eskenazi Health, located in Indianapolis, Indiana, provides a comprehensive education program called Baby Boot Camp. Previously, Baby Boot Camp was offered as a 1.5 hour live workshop between two and four days a week, depending upon the availability of staff to teach the classes. Without designated employees to run Baby Boot Camp, staff members at Eskenazi Health Family Beginnings had to rotate teaching duties. It was a challenge for the entire unit to lose a nurse to teaching and prep time on days that classes were held.

In addition to the strain on staffing, live workshops presented other difficulties. There were questions about the consistency of information presented in the trainings, given that different staff members were teaching the curriculum each day. The availability of interpreters was also limited, presenting significant barriers for 40% of Eskenazi Health Family Beginnings’ patient population, for whom Spanish is the native or preferred language.

New or expectant mothers wanting to participate in the live workshops often encountered barriers of their own, such as lack of transportation or childcare. Mothers would frequently bring children to class with them, which tended to be disruptive and distracting for others in attendance. Over time, live class offerings grew more difficult for learners and instructors alike.

Recognizing these challenges, Eskenazi Health sought to revamp their Baby Boot Camp and improve the patient education experience for both patients and staff. “This was born out of the need to reduce the workload on our nurses,” says Toni Galyan, Staff Development Coordinator and Project Director for Baby Boot Camp, alluding to the previous strategy for providing new baby care education.

The Solution

Ms. Galyan and fellow Staff Development Coordinator, Sabrina Dryden, began to brainstorm alternative approaches to educating new mothers and considered video delivery as a viable alternative. Eskenazi Health already had a subscription to videos in both English and Spanish through the Newborn Channel, which were looping in repetition on a designated channel. In addition, their existing Tigr interactive education system had patient education videos and information, on-demand and directly to the patient bedside. They recognized that patients would benefit greatly from being able to use this feature to view programs and information at their convenience. The ultimate goal was to present all the same valuable educational content, but to use video-based delivery exclusively to provide this important information to new and expectant mothers and family.

Eskenazi Health
A Tigr Interactive Patient Education Initiative: Baby Boot Camp for New Mothers

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Client:
Eskenazi Health
www.eskenazihealth.edu

Location:
Indianapolis, IN

Size:
- 315 Licensed beds
- 1,011 Physicians
- 4,274 Employees
- 2,233 births recorded in 2015

Customer since:
2013

TeleHealth Solutions:
- Samsung Healthcare Grade LED Televisions
- Curbell Gen4 Direct Access Pillow Speakers
- Tigr AP Interactive Patient Education System
- Multi-lingual Patient Education Videos
- C.A.R.E. Channel with Guided Imagery
- TeleHealth 360° Service

The Client:
For 156 years, Eskenazi Health has provided high-quality, cost-effective, patient-centered health care to the residents of Marion County and Central Indiana. Accredited by The Joint Commission, nationally-recognized programs include a Level I trauma center, regional burn center, comprehensive senior care program, women’s and children’s services, teen and adolescent care programs, Eskenazi Health Midtown Community Mental Health, and a network of primary care sites located throughout the neighborhoods of Indianapolis known as Eskenazi Health Center.
CASE STUDY: ESKENAZI HEALTH

Eskenazi Health partnered with their TeleHealth Services account administrator and Newborn Channel account executive to facilitate the process of making select Newborn Channel video offerings available on their Tigr system anytime, on-demand. Newborn Channel video education has demonstrated to be 55% more effective than print education alone.* Program topics range from infant and mom care, breastfeeding and immunizations to infant safety, development, and injury prevention.

The team also worked to expand their program and utilize some of the advanced features of their Tigr system such as comprehension assessments and automatic notifications. “Videos can expose patients to new information,” explains Amy Glenn, TeleHealth Services account administrator and a North Carolina Registered Health Educator. “But people are much more likely to retain lessons learned if there is some kind of interactivity paired with the content.”

The Eskenazi Health Family Beginnings team prepared questionnaires for patients to validate retention of important information and aid clinicians in offering more personalized and patient-specific education through the use of teach-back. Tigr automates the quiz process with result notifications delivered instantly via print and email to Galyan and Dryden.

The Results

The outcomes of the project have been resoundingly successful. “Change is always a challenge,” says Dryden, “However, our team did a stellar job of getting involved and embracing this new way of delivering the education.” The staff’s commitment to making Baby Boot Camp On-Demand a success was reflected in numbers during the inaugural month of October: 199 women delivered babies on the unit; 11 videos and quiz pairings were assigned to each and with nearly 1,600 video views for the month, the completion rate was an astounding 74%.

“The lessons learned go home with the whole family.”

Sabrina Dryden, Staff Development Coordinator

“The education isn’t mandatory,” explains Galyan, “It’s an optional offering to our patients, but most are eager to watch the videos and take the quizzes. When they see the ease of use they get excited about finishing the rest of the videos and quizzes in the series.” Baby Boot Camp is introduced by a nurse, who presents the patient with an instructional flyer for the Tigr system, with a checklist of videos in the series. Nurses demonstrate how to access videos on the Tigr system and help patients take the first quiz, after which most quickly master the process and finish viewing the videos on their own. Upon completion of the checklist, patients return the flyers to their nurses. Each patient receives a voucher to the BABE Store, as a completion gift, where she can cash it in for infant clothing or baby care items. The nursing team has also developed strategies to address individual learner needs, such as one-on-one remediation for mothers who score poorly on post-assessments and guided assistance through the quizzes when literacy appears to be an issue.

Moving Baby Boot Camp from the classroom to on-demand video delivery has led to several unanticipated benefits for patients. “Some of them really have fun with it,” says Dryden. “They think of the quizzes on their TV like playing trivia or a game show. They also involve their visiting family members and answer the quizzes together. When we held the live classes during the daytime, spouses and other family members were at work so most women had to come by themselves. Now everyone in the room can participate in Baby Boot Camp by watching the videos together, whenever it’s convenient for them. The lessons learned go home with the whole family.”

The benefits are felt by the entire team at Eskenazi Health Family Beginnings, where they no longer have to divert nurses away from clinical duties for classroom teaching. The end result is less juggling of limited staff resources and less stress for all. It’s equally good news for Eskenazi Health, where an annual savings of approximately $16,164.72** is realized by relieving staff of classroom teaching duties to focus on patient care. Most importantly, the new and improved Baby Boot Camp promises a lasting impact for its graduates.

**Figure based on cost of a registered nurse’s hourly wage to teach live classes 3 times each week for 52 weeks of the year; 1.5 hours for teaching, an additional 1.5 hours of preparation/checkout work for each class. Median annual salary for RN in the state of Indiana: $65,612.

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References: