

Leveraging Interdisciplinary Partnerships within Hospital Systems to Improve the Language Environments of Infants in the Neonatal Intensive Care Unit

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Background

- Early language interactions and the language environments that surround infants are strongly associated with enhanced language and cognitive development later in life (Swanson et al., 2019).
- It is critically important to enhance the language environments of the most vulnerable infants, including those in the Neonatal Intensive Care Unit (NICU).
- Parents often require guidance and support on how, why, and when to engage linguistically with infants.
- Talk With Me Baby (TWMB) is an initiative to train professionals on ways to engage babies socially and linguistically and how to transfer that capacity to families.

Objective

To engage Registered Nurses (RNs) and Allied Health Professionals (AHPs) to determine best practices of TWMB implementation in the NICU setting.

Methods

- This study was guided by the Practical, Robust Implementation and Sustainability (PRISM) implementation science model.
- Included in this model are elements to implementation
 - Program (intervention)
 - External environment
 - Implementation and sustainability infrastructure
 - Recipients
- Interdisciplinary team tailored the existing TWMB training in accordance with NICU policies and priorities.
- Qualitative descriptive design.
- Four focus groups of NICU RNs and AHPs (n=31).
- This study was IRB approved.
- Focus groups were audio recorded and transcribed prior to thematic analysis.

Results

- This study identified important factors to enhance the implementation of TWMB in the NICU setting.

Reach

- NICU, TICU, CICU, CACU, Music Therapy, New Grads, New Employees, Parents

Effectiveness

- Affirming, expanded on foundational knowledge, acceptable, willingness, easy to use, appreciated customization

Adoption

- Developmental council, admission and discharge process, developmental rounds, interdisciplinary approach

Implementation

- Tips for talking with parents, clustering care, modeling, tailoring implementation (e.g., inclusive of cues and states)

Maintenance

- Ongoing developmental fairs, book programs, baby buddies program, new graduate orientation, embedding in routine, creating an environment

- Optimized TWMB NICU based on the SENSE program (Supporting & Enhancing NICU Sensory Experiences).

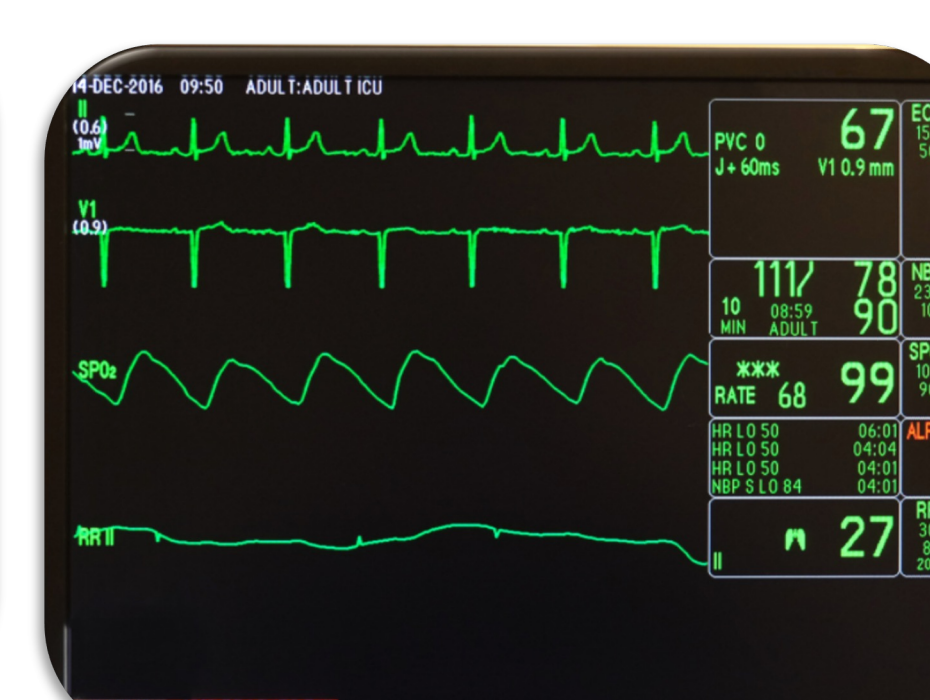
Ready



In-Between



Not-Ready



Conclusions

- Infants in the NICU are at increased developmental risk and thus require supportive environments.
- Parents of NICU infants struggle how and when to engage with their child socially and linguistically.
- Adaptation of TWMB trainings inclusive of stress cues are an important step towards supporting parents to safely engage socially and linguistically with their critically ill child.
- Use of the PRISM implementation science model allows for translation of research to practice.
- A key concept of the PRISM model examines how a program (intervention), external environment, infrastructure, and recipients interact to impact the adoption, implementation and maintenance of a program (intervention).

Implications

- Training RNs and AHPs in NICUS on TWMB provides a robust language environment to surround vulnerable infants in the NICU.
- RNs and AHPs are equipped to train parents on ways to engage with their babies socially and linguistically.
- Interventions aimed at training nurses and AHPs within the NICU have the potential to enhance developmental outcomes.

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