# The ALIGN Framework: A Parent-Informed Approach to **Prognostic Communication in the Neonatal Intensive Care Unit**

Simran Bansal<sup>1</sup>, Mary Carol Barks<sup>2</sup>, Debra Brandon, PhD, RN, CNS<sup>3</sup>, Kathryn Pollak, PhD<sup>3</sup>, Hannah Glass, MD, MAS<sup>4</sup>, Peter Ubel, MD<sup>3</sup>, Monica Lemmon, MD<sup>3</sup> <sup>1</sup>Trinity College of Arts and Sciences, Duke University, <sup>2</sup>Duke-Margolis Center for Health Policy, <sup>3</sup>Duke School of Medicine, <sup>4</sup>UCSF Benioff Children's Hospital

# BACKGROUND

In the neonatal intensive care unit (NICU)....



Parents of critically ill infants must cope with grief, anxiety, and fear related to their child's uncertain outcome



Clinicians must deliver complex, uncertain, and distressing prognostic information to parents

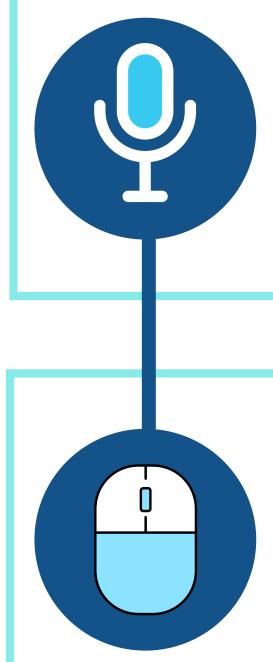


**Good communication** is key to helping (a) parents manage overwhelming emotions and (b) clinicians facilitate productive discussions about prognosis

Yet, few tools exist to guide these conversations

We aimed to address this gap by developing a parent-informed framework for communicating prognostic information in the NICU context.

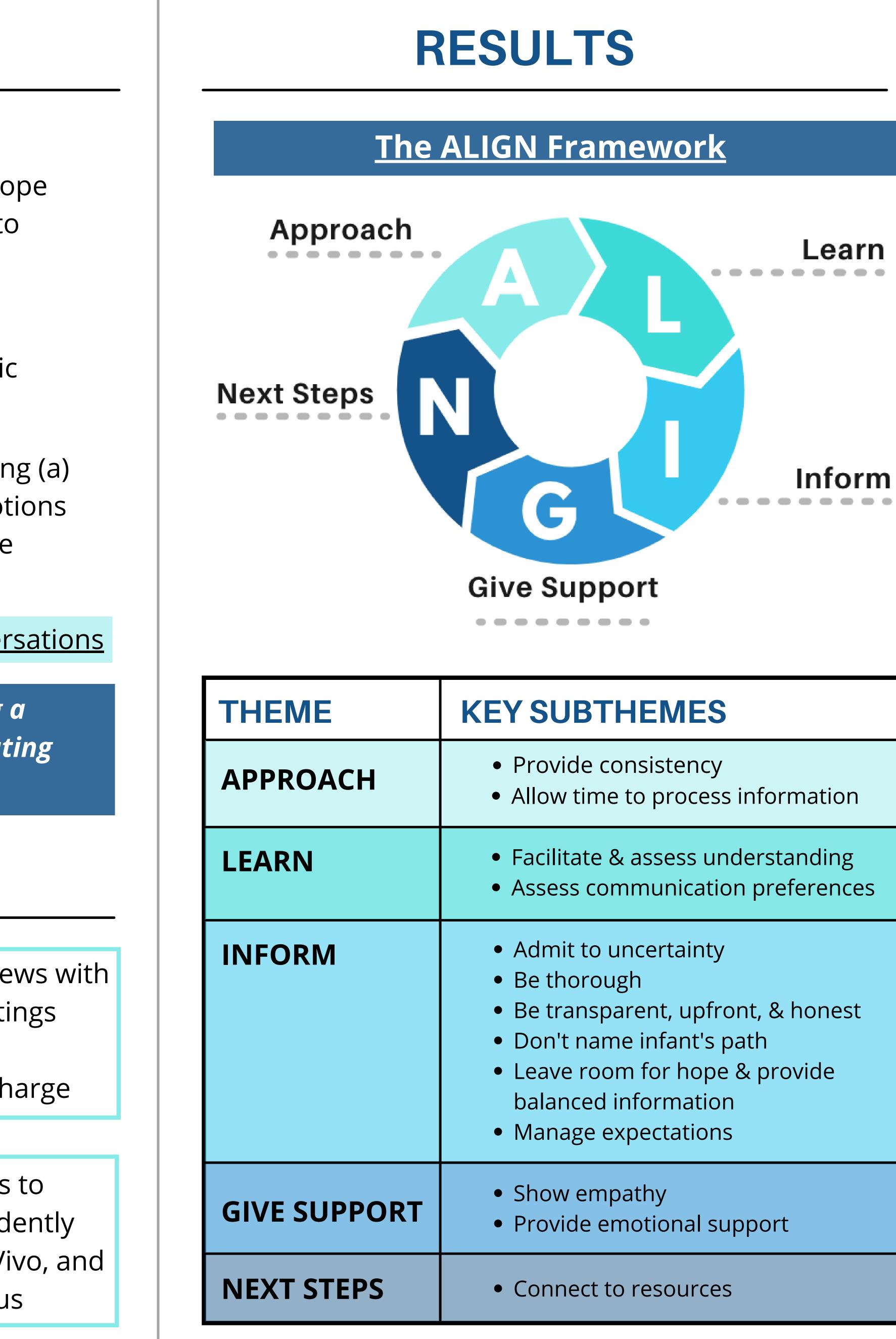
## METHODS



Conducted semi-structured interviews with 52 parents of 37 infants after meetings with the medical team, at hospital discharge, and 6 months post-discharge

Used conventional content analysis to identify and refine codes, independently coded transcribed interviews in NVivo, and resolved discrepancies in consensus

Acknowledgements: This work was funded by the National Institute of Neurological Disorders and Stroke of the National Institutes of Health under Award Number (K23NS116453).



### **Select Quotes From Parent Interviews**

On <u>assessing communication preferences</u>: "One of the most traumatizing parts of all of this is not having any control, so giving parents control over something as basic as how much information they want....even that is *empowering."* (Mom of a premature infant with IVH)

On **<u>showing empathy</u>**: "I know you all get paid to have this whole character and stuff, but **at the end of the day** we still, we are both human. Talk to me on a personal level, not with all this medical stuff, but from deeply in your *soul.*" (Mom of an infant with a mitochondrial disorder)

On <u>being transparent, upfront, and honest</u>: "*I'd* rather you be transparent and straightforward because this has to do with her health and life. I don't want a doctor or a nurse on a team that's timid about what they have to *say.*" (Mom of an infant with congenital heart disease)

Our results indicated five key themes, organized into phases of communication (Table 1). Parents valued **consistent** updates from trusted clinicians discussions **individualized** to their preferences **honest**, **thorough**, and **balanced** information \*real-time support and connection to resources

<u>CONCLUSION</u>: The ALIGN framework offers a novel, parent-informed strategy to guide prognostic discussions, while allowing for flexibility and acknowledging that steps are iterative. Future studies should examine how using this framework in practice impacts parent-provider communication.





# **uke** Children's

## **SUMMARY**