

# Advancing NICU Excellence:

## How AngelEye Health Technology Strengthens U.S. News & World Report Rankings and Hospital Performance

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### Executive Summary

High-performing NICUs excel where it matters most: safety, family partnership, and measurable outcomes. AngelEye Health equips teams with a connected platform – **CameraSystem**, **MilkTracker**, **NICU2Home**, and **AIVision** that makes safer feeding workflows standard, empowers families with structured education and real-time connection, and produces data mapped to U.S. News & World Report's (USNWR) Neonatology Survey (Section F). The result: fewer feeding errors, higher mother's-own-milk (MOM) at discharge, stronger discharge readiness, and transparent reporting that supports continuous improvement, resulting in improved USNWR rankings.

Every year, U.S. News & World Report highlights hospitals that deliver exceptional neonatal care. For leaders, these rankings are more than prestige; they validate safety, quality, family partnership, and outcomes. Today's top-performing NICUs recognize that technology-enabled family engagement, digital safety workflows, and data transparency directly impact key measures that determine ranking success.

**AngelEye Health** is uniquely positioned to help hospitals excel across these domains. Through an integrated platform, AngelEye empowers teams to enhance quality metrics, elevate the patient-family experience, and capture the measurable outcomes that drive recognition. Six of the top ten 2025 USNWR NICUs currently use AngelEye Technology. This paper outlines how AngelEye solutions align with the U.S. News Neonatal Care Survey (Section F) criteria, strengthen clinical and operational performance, and differentiate hospitals as leaders in family integrated, technology-enabled neonatal care.

### Understanding US News Neonatology Metrics and Their Impact

The *U.S. News Neonatal Care Survey* evaluates Level IV NICUs across domains that reflect clinical rigor, quality, outcomes, and holistic family support. These include:

- Family engagement and psychosocial services
- Breast-milk use and feeding safety protocols
- Multidisciplinary QI and safety programs, including outcome metrics
- Parent participation in improvement efforts
- Adoption of health information technology
- Discharge readiness and transitional care
- Medication and infection-prevention systems

Each domain depends on reliable data, consistent processes, and visible evidence of impact in all areas.

### 6 of the Top 10 USNWR NICUs use AngelEye Technology

#### AngelEye Value mapped to USNWR criteria:

##### Safety:

Barcode-verified milk handling from prep to bedside with traceability (F10.4–F10.6 and F11).

##### Experience:

24/7 secure family connection and multilingual updates that reduce stress and improve trust (F8, F9, F10, F28).

##### Evidence:

Survey-ready exports and engagement metrics (F8–F11, F28, F33, F42–F43).

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## Quantifying the Impact: How AngelEye Supports US News Scoring Criteria

### Family Connection and Equity in Care

AngelEye’s CameraSystem provides secure, one-way, video-only live-streaming that connects families 24/7 while protecting staff privacy. Families stay emotionally present and informed, reducing stress and enhancing trust beyond the hospital walls [1]. AngelEye Health’s virtual engagement platform helps hospitals address social determinants of health that can otherwise limit family participation in neonatal care. The technology ensures that parents facing barriers such as transportation challenges, work schedules, or long distances can remain present virtually and involved in their child’s care. In addition, the built-in messaging feature supports communication in more than 70 languages, breaking down linguistic barriers and allowing care teams to deliver updates and emotional support in each family’s preferred language. Together, these capabilities advance health equity, strengthen family/clinician partnership, and promote better outcomes for all infants, regardless of a family’s socioeconomic or cultural background.

NICU2Home engages families providing a structured digital pathway that actively engages families from admission through discharge. By delivering personalized education, tracking task completion, and enabling two-way communication, the platform transforms families from passive recipients of information into confident partners in care. This consistent, measurable engagement supports stronger discharge readiness, improved continuity, and documentation of family participation.

For NICUs reporting F8, F9, F10, F28, F33, F42, and F43, the CameraSystem and NICU2Home platform demonstrate a structured family engagement infrastructure, which is key to scoring well in family-service domains, fostering a deeper partnership with families [2].

## Advancing Safe & Efficient Feeding Management

AngelEye Health’s MilkTracker solution directly addresses F10, F11, F28, and F43 survey requirements. It enhances milk safety by introducing a fully traceable, barcode-based workflow that reduces the potential for human error during milk and formula preparation, storage, and administration [3]. Each step, from breastmilk expression to bedside feeding, is electronically verified, thereby promoting safe, accurate preparation and administration of the right feed to the right patient at the right time. Beyond safety, the system generates detailed, time-stamped data that feeds directly into the hospital’s Quality Assessment and Performance Improvement (QAPI) program. These data enable teams to track trends in feeding errors, avoid wastage, and improve process compliance, thereby transforming routine operational records into actionable insights. As a result, MilkTracker not only strengthens patient safety and regulatory compliance but also provides objective evidence to support ongoing QAPI initiatives and continuous quality improvement.

## Discharge Readiness and Family Empowerment

Effective discharge education and family preparedness are key components of neonatal quality and carry influence in the U.S. News survey. AngelEye Health’s NICU2Home Solution delivers a structured, digital roadmap that personalizes discharge education, tracks family progress, and provides real-time visibility for care teams. By engaging parents early in the NICU stay, the platform fosters competence and confidence, reduces variability in discharge readiness, and supports timelier, safer transitions home [4].

“The AngelEye CameraSystem enables us to extend the walls of the NICU, giving every parent and loved one the priceless gift of presence. It has become a powerful tool for equity, compassion, and connection within our NICU and an essential part of how we deliver family centered care.”

– **Ashley Simms,**  
Vice President of Nursing



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Research on the original NICU-2-HOME app demonstrated that parents using the platform reported greater self-efficacy and showed a trend toward shorter neonatal length of stay [5]. Building on that foundation, NICU2Home provides hospitals with quantifiable metrics, such as education completion and discharge task completion rates, that can be incorporated into QAPI documentation and U.S. News survey submissions F8, F10.1, F10.3, F33, F42, and F43. The result is a scalable, evidence-based approach that advances health equity, strengthens family partnerships, and helps institutions demonstrate excellence in neonatal outcomes and transition-to-home processes.

### Future-Proofing Your USNWR Strategy with AI-Enabled Data

While this paper focuses on the U.S. News & World Report (USNWR) Neonatal Section F criteria that hospitals can operationalize and report today, many leaders are already asking what will differentiate top programs in the next generation of rankings. As expectations evolve, NICUs will be asked not only to demonstrate adherence to evidence-based processes but also to provide standardized, longitudinal outcome data and robust examples of safety and quality surveillance.

AngelEye Health's AIVision research program is designed to partner with hospitals to make that transition. Building on the same digital infrastructure described in this paper (bedside cameras, MilkTracker, and NICU2Home), AIVision will use camera- and sensor-derived signals, alongside clinical data, to generate structured insights into neuromotor risk, positioning and asymmetries, physiologic instability, and other patterns that may precede adverse events. The goal is to translate continuous bedside observations into reliable, reportable quality indicators that can be embedded in routine QAPI workflows, rather than relying solely on intermittent assessments or retrospective chart review.

These emerging capabilities align closely with USNWR domains that emphasize outcomes and ongoing quality improvement. For example, standardized neuromotor and follow-up metrics, early identification of risk, and continuous safety surveillance can strengthen performance and narrative examples in domains such as F15, which focus on neurodevelopmental follow-up, quality improvement initiatives, and standardized reporting. By turning high-resolution bedside data into longitudinal metrics, NICUs can better demonstrate both process reliability and impact on infant and family outcomes over time.

For NICUs that already perform well on the current Section F checklist, collaborating on AIVision-enabled quality initiatives offers a path to differentiate their program. Participation in these efforts signals to USNWR evaluators, referring providers, and families that the institution is investing in advanced, data-driven care models, proactive risk detection, and continuous improvement. Importantly, the investments hospitals make today in AngelEye's CameraSystem, MilkTracker, and NICU2Home infrastructure lay the digital foundation for these future capabilities, ensuring that current USNWR gains also support a longer-term strategy for innovation, safety, and measurable outcomes.

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## Cross-Walk: AngelEye Solutions Mapped to U.S. News Section F

USNWR Survey Question / Metric	AngelEye Approach	CameraSystem	MilkTracker	NICU2Home
<b>F8a</b> Family Psychosocial Support Program (NICU-specific)	↑ Referral follow-through (task completion %); ↑ family trust, integration, and satisfaction; documented closed-loop referrals (Program must be hospital-run.)	✓	✓	✓
<b>F8b</b> Sibling visitation allowed	↑ Family connection when unable to be physically present; ↑ sibling accessibility and engagement; ↓ disruption of the family unit. (Policy remains facility-governed.)	✓		✓
<b>F8c</b> Parent-to-parent support group(s), NICU-specific	↑ Attendance and survey response rate; qualitative improvements in perceived support/trust. (Program leadership external to AngelEye.)			✓
<b>F8d</b> Dedicated psychologist/psychiatrist for parent consults	↑ Referral completion; ↓ time-to-scheduled visit			✓
<b>F8e</b> Child Life support team available	↑ Education completion, ↑ caregiver readiness	✓		✓
<b>F8f</b> NICU-dedicated multidisciplinary developmental care team	↑ Access to education resources; ↑ documented caregiver competence; clearer team communication around plan of care.			✓
<b>F8g</b> Complex Discharge Coordinator (dedicated role)	↑ % tasks complete ≥48h pre-discharge; ↓ avoidable day-of-discharge delays; transparent accountability trail.			✓



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## Cross-Walk: AngelEye Solutions Mapped to U.S. News Section F (Continued)

USNWR Survey Question / Metric	AngelEye Approach	CameraSystem	MilkTracker	NICU2Home
<b>F8.1</b> <b>Elements of a "Safe Sleep" program</b>	↑ Parent education completion and acknowledgments; consistent messaging with staff policy. ↑ On-time practice completion; consistent documentation for audits; fewer last-minute education gaps.	✓		✓
<b>F9</b> <b>NICU-specific parent advisory committee with direct impact</b>	↑ Responsiveness to family-identified needs; measurable reduction in repeated FAQs after interventions. ↑ family engagement	✓		✓
<b>F10.1</b> <b>% infants discharged &lt;120d on partial/full MOM</b>	↑ MOM at discharge; ↓ time to pump access; ↑ bonding; ↑ connection to lactation resources; pump tracking log	✓	✓	
<b>F10.2</b> <b>Dedicated off-bedside milk/formula prep room (aseptic + restricted)</b>	↑ Standardization and traceability; ↓ near-misses. (Physical room/policy required to answer 'Yes'.)		✓	
<b>F10.3a</b> <b>Breast Milk committee (meets ≥ monthly)</b>	↑ Focused QI cycles; ↑ data provision & accuracy.	✓	✓	✓
<b>F10.3b</b> <b>Process to obtain home pump ≤48h</b>	↑ % pumps within 48h; ↓ median hours to pump; ↑ MOM at discharge.		✓	✓
<b>F10.3c</b> <b>Donor milk program with written criteria</b>	↑ Policy adherence documentation; ↓ undocumented exceptions; clearer transition tracking.	✓	✓	✓

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## Cross-Walk: AngelEye Solutions Mapped to U.S. News Section F (Continued)

USNWR Survey Question / Metric	AngelEye Approach	CameraSystem	MilkTracker	NICU2Home
<b>F10.3d</b> Formal process for teaching feeding preparation at discharge	↓ Home mixing errors; ↑ discharge readiness; fewer post-discharge feeding callbacks.		✓	✓
<b>F10.4a</b> Barcoding for correct breast milk identification	↓ Wrong-milk events per 1,000 feeding days; ↑ scan compliance; supports F10.5–10.6 reporting.		✓	
<b>F10.4b</b> Dedicated breast milk technician	↓ Prep errors / rework; ↑ first-pass yield; documented role effectiveness.		✓	
<b>F10.5</b> Track breast milk administration error rate	↑ Transparency; trendable safety metric; foundation for F10.6 rate calculation.		✓	
<b>F10.6</b> Report # errors, breast-milk feeding patient-days, error rate/1,000	↑ Reporting accuracy; consistent numerator/denominator; ready-to-submit survey values.		✓	
<b>F11</b> Track annual total number of breast milk administrations	↑ Data completeness; supports error-rate denominators and workload planning.		✓	
<b>F15d</b> Neuro-developmental clinic for high-risk NICU discharges	↑ Kept-appointment rate; ↑ caregiver preparedness; smoother handoffs. (Clinic must exist to answer 'Yes'.)			✓
<b>F28.1</b> Former NICU parent integral to QI/safety in the last year	↑ Parent-partnered QI initiatives; measurable reductions in targeted issues.		✓	

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## Cross-Walk: AngelEye Solutions Mapped to U.S. News Section F (Continued)

USNWR Survey Question / Metric	AngelEye Approach	CameraSystem	MilkTracker	NICU2Home
<b>F33</b> Multidisciplinary review of unplanned readmissions within 7 days	↑ Review completeness; clearer root-cause patterns; targeted countermeasures.			✓
<b>F42</b> Median LOS (Ileal/Jejunal atresia) over 5 years	↓ LOS variation; documented readiness milestones; contextual data to explain EHR LOS trends (calc remains EHR-based).			✓
<b>F423</b> Median days to full enteral feeds ≥100 kcal/kg/day (Gastroschisis) over 3 years	↓ Days to full feeds; ↑ MOM during advancement; auditable method for survey (state sustainment rule).		✓	

## Beyond the Rankings: Broader Organizational Gains

### Supports Magnet® and Joint Commission Standards

- Demonstrates excellence in patient-family partnerships
- Provides documented evidence of education and engagement
- Reinforces nursing leadership in QI and outcomes

### Drives ROI and Operational Efficiency

- Reduces manual workload for nurses and dietitians
- Automates compliance documentation for survey submission
- Decreases costly misfeeds and accelerates discharge readiness

### Enhances Reputation and Recruitment

In today’s healthcare landscape, families are active participants in care decisions, researching quality metrics, reading patient reviews, and choosing hospitals that demonstrate quality, innovation, and compassion. By aligning directly with US News measures, AngelEye’s suite of solutions not only drives measurable improvements in NICU quality and safety but also strengthens the hospital’s reputation as a leader in family integrated innovation. Families and clinicians alike are drawn to organizations that invest in technology, empowering better outcomes, stronger engagement, and family integrated care.



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## Proof in Action

**At a large Level IV NICU**, AngelEye Health’s CameraSystem, and several features now part of NICU2Home, transformed care delivery after their rollout in late 2023. The results were astonishing, boasting a 6% increase in family satisfaction scores via Press Ganey, 11% increase in staff engagement, and 6% increase in mom’s own milk at discharge [6]. In addition to these impressive metrics over 10 months, there were 227,000 logins to the system by families, totaling 1770 hours of viewing their neonates [6]. Allowing families to see their babies, connect with the care team via secure messaging, and receive education in their native language has transformed the care delivery model, which leads to improved outcomes. The clinical team reports that this parent-neonate connection has enabled more efficient updates, the capture of milestones, education of families, improved support, and a sense of pride and connection between staff and families.

These data mirror the very indicators measured by *U.S. News & World Report*—feeding safety, family partnership, and measurable quality improvement.

## The Strategic Imperative for Leaders

**Table 2. Leadership goals and contributions of AngelEye solutions.**

Leadership Goal	How AngelEye Contributes
<b>Strengthen clinical outcomes and safety</b>	Barcode verification; support for evidence-based nutrition workflows; robust QI data capture; enhanced family engagement; improved discharge readiness.
<b>Reduce operational burden</b>	Automation of manual processes; streamlined communication; centralized access to education and engagement data.
<b>Differentiate organizational brand</b>	Demonstrated innovation, family integrated care, and strong patient experience metrics support recruitment, retention, and market positioning.
<b>Improve USNWR performance</b>	Technology-enabled support across multiple Section F items (e.g., F8, F9, F10, F11, F33, F42, F43), backed by survey-ready data exports and quality narratives.

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## Conclusion

The next generation of high-performing NICUs will be defined not only by their clinical outcome metrics but by their ability to deliver **connected, innovative, data-driven, and family integrated care that supports improved clinical and family outcomes.**

AngelEye Health gives hospitals the infrastructure to do just that by delivering measurable, survey-ready evidence of excellence that translates directly into stronger rankings, higher satisfaction, and better outcomes.

## Call to Action

### What to ask your team:

1. Do we have a verifiable milk safety rate and a monthly denominator to report per F10.6?
2. Can we show a closed-loop record of discharge teaching and task completion rates?
3. How are we measuring family engagement today, and is it improving MOM at discharge?

### Elevate your NICU's standing.

Partner with AngelEye Health to map your U.S. News & World Report performance domains to actionable, technology-enabled metrics.

**Contact:** <https://www.angeleyehealth.com/schedule-a-call/>

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