

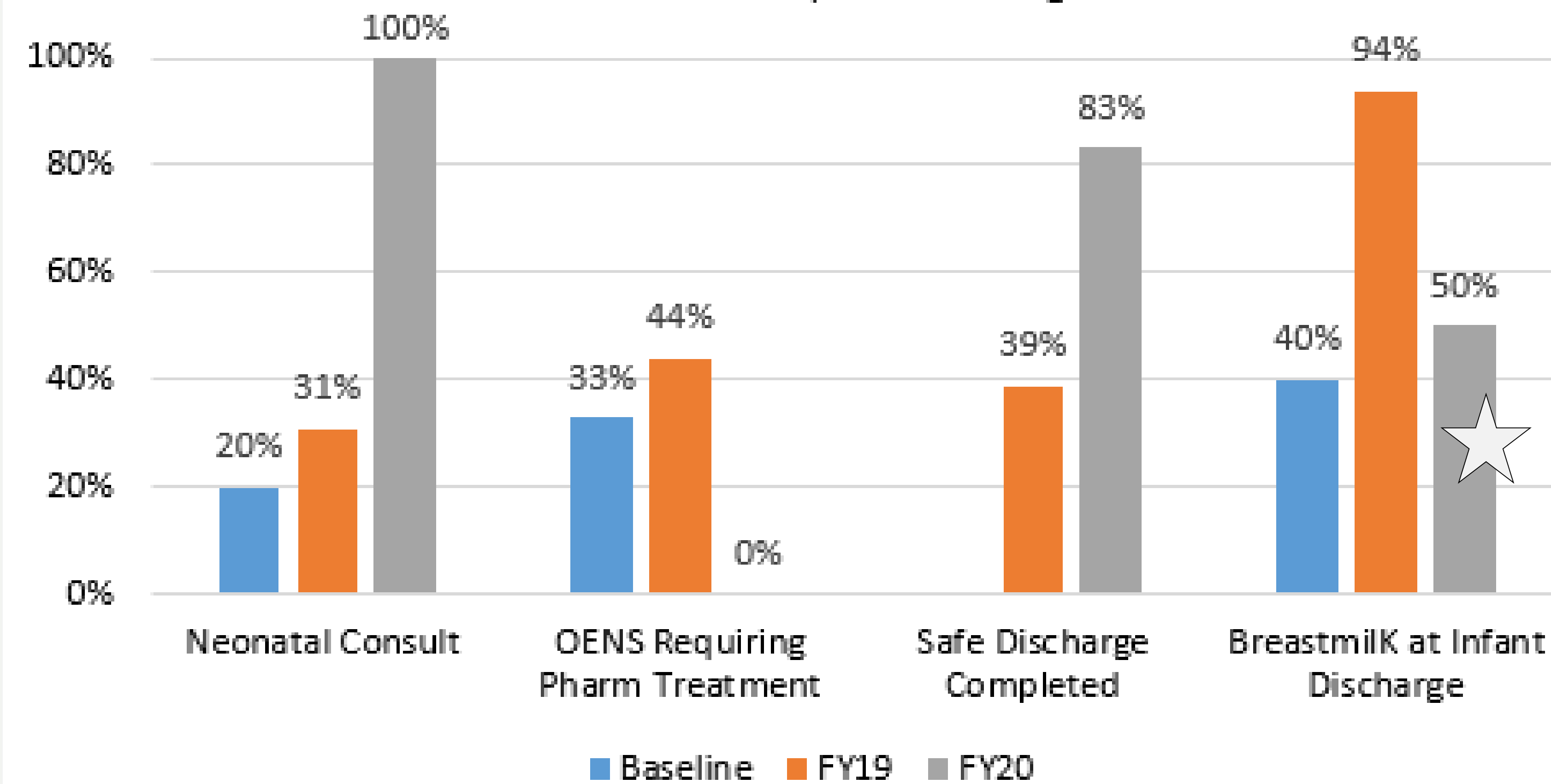
## 2. Hospital & QI Team Overview

L. Maloney - Improvement Leader  
S. Desai- Neonatologist lead  
S. Shakir, MD - Pediatrician  
R. Brennan - Outcomes manager  
M. Puchalski - Neonatal Nurse Practitioner  
J. Williamee & E. Moorhouse-Sperry - Social Work  
S. Leston - NICU RN  
G. Mellace - MB RN  
M. Albano - Lactation  
T. Horsky - Pharmacist  
L. Lim - Case manager  
M. Hinshaw & E. Burns - Directors



## 3. MNO-Neo Data

**MNO Neonatal Outcomes**  
Project Start by Fiscal Year  
Fiscal Year = September - August



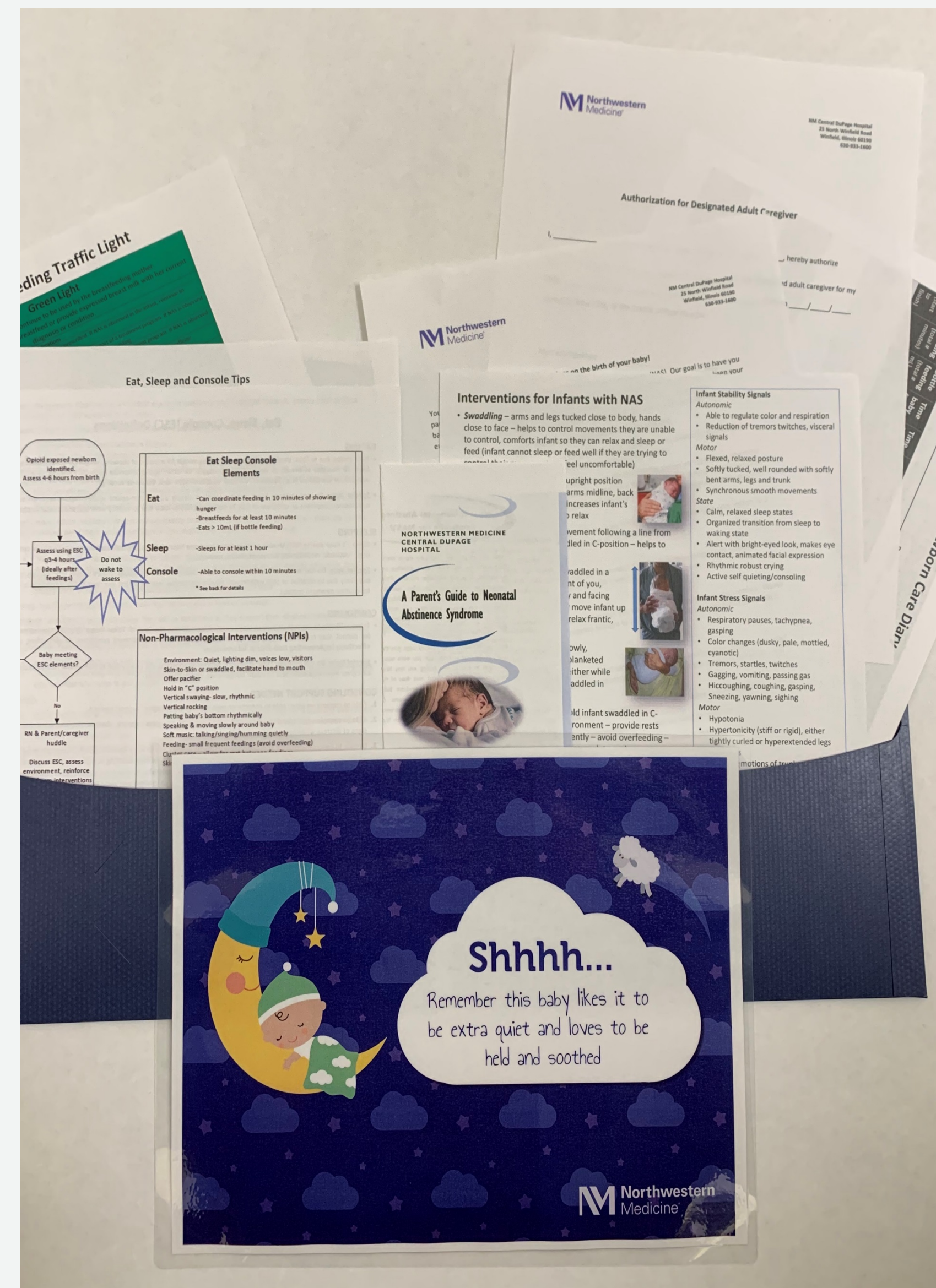
★ Of all eligible mothers, 100% received breastmilk

	Baseline	FY 19	FY 20
OENs $\geq$ 35 Weeks	5	16	6
Average LOS	16	11	5

## 4. MNO-Neo Progress

### NAS Assessment Tools

- 2/2020- ESC implemented Mother Baby Unit
- NICU - Modified Finnegan – Exploring to move forward with ESC



### MNO- Neo Folder

**Left Side: Provider Resources**

*Eat-Sleep-Console*  
*ESC Algorithm*  
*Breastfeeding Traffic Light*

**Right Side: Family Resources**

*Parent Guide to NAS*  
*Non-Pharm Interventions*  
*Congratulations letter*  
*Other Caregiver Authorization*  
*Newborn Care Diary*  
*Shhh signs (Door & Crib)*

### Retrospective review of all newborn cases

- Identified ESC cases where no pharmacologic treatment was needed, if scored with Finnegan, these would have been treated
- No readmissions for NAS
- Allows for constant PDSA cycles for improvement

### Education Campaign

- Nursing - Classroom, eLearning, staff meetings & webinars
- Physician- Department meetings, ILPQC resources emailed, 1:1 education with folders, Peds M&M, High risk rounds, webinars
- Ancillary- eLearning
- Door signage generated questions and allowed to educate other departments (Lab, hearing screeners, birth clerks, etc.)

## 5. Coordinated Discharge

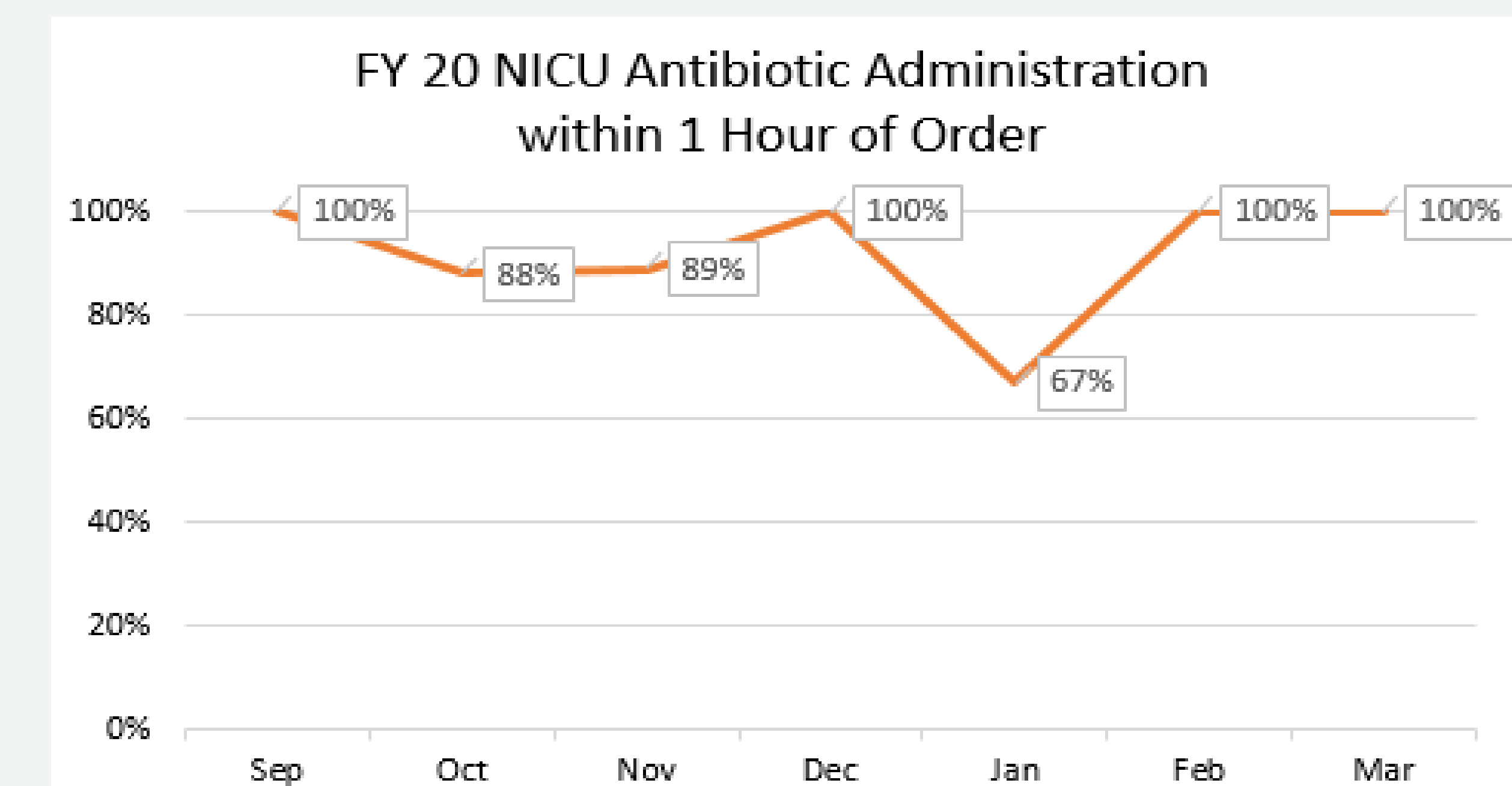
- All OENs have a social work consult
- Lactation follow up appointment
- Standardized discharge note includes all topics recommended by ILPQC
- Provider to provider handoff
- All OENs requiring pharmacological treatment are scheduled for developmental clinic

## 6. BASIC

### Anticipated Team & Roles:

Neonatologists	Pharmacist	NICU Director
QI Member	Lab Manager	NICU Clinical Practice Partner
Staff RNs		

Current work:





Use this space for overflow and additional information your team would like to share.

**100% Breastmilk at infant discharge for mothers who chose breastfeeding (& eligible)**

- Historically high breastfeeding initiation rate for all infants
- Included breastmilk discussion in neonatal consult
- Developed process for prenatal lactation consultation
- Lactation support & Certified Breastfeeding Counselors
- Mothers to stay in postpartum room after maternal discharge

**OENs discharged with a coordinated plan - Cumulative 83.3%. All discharges since Dec. 2019 met criteria.**

- Coordinated with social work
- Collaborated with hospital child safety team
- Standardized social work notes template align with ILPQC recommendations – SMART template created for this population

**Decreased the percentage of OENs receiving pharmacologic treatment & decreased overall length of stay from 16 days to 5**

- Bedside handout with non-pharm interventions which include instructions, infant stability signals & infant stress signals- used by staff & families
- Newborns room with their mother post maternal discharge
- Implemented ESC in Mother Baby Unit (MB); NICU Uses Modified Finnegan exploring transitioning to ESC
- Educated physicians
- Standardized consults & note templates
- Neonatology team support pediatricians and participate in huddles as needed

**Kratom**

- Kratom is an herbal substance which can be purchased legally in capsule, pill, or extract. Can be used as an herbal tea to manage withdrawal symptoms.
- Can have same effects as opioids- newborn can have NAS symptoms.
- Not detected in routine maternal urine toxicology.
- As of recently, it was not detectable in newborn toxicology tests. Some companies now have expanded umbilical cord toxicology panels to include Kratom.
- Can cause drowsiness, may need to round on these patients more frequently.
- **Important take away is to always inquire for over-the-counter and herbal supplements use**