October 21, 2019

Dear Doctors:

We are very excited to inform you that we are teaming up with several other hospitals as part of the Illinois Perinatal Quality Collaborative Mothers and Newborns affected by Opioids-Neonatal Initiative with the ultimate goal of improving care of newborns who were exposed to substances (specifically opioids) during pregnancy.

As you know, perinatal opioid use and neonatal abstinence syndrome (NAS) is a major public health concern in Illinois. In the context of an ongoing epidemic of opioid use and abuse, the incidence of mothers, infants, and families impacted by opioid use during pregnancy continues to rise. Numerous state and community organizations have worked in recent years to improve the care and outcomes for opioid exposed newborns (OENs) and their families in Illinois. Among hospitals caring for OENs and their families in this state, significant variation in clinical and social interventions exists due to lack of robust scientific evidence for practices that optimize maternal and infant outcomes. As other U.S. states grapple with this opioid epidemic, perinatal quality collaboratives continue to develop innovative strategies to improve the care of SENs and their families. Building upon the work done by states like Massachusetts, Ohio, and Vermont, the ILPQC MNO-Neonatal Initiative seeks to improve the hospital care of OENs using a quality improvement framework with implementation of a bundle of care practices along with robust data collection and analysis to measure the impact of our work.

Through this project, we are changing our approach to how we care for OENs in our units. This will include a new evaluation system that is based on 3 main physiologic parameters: **eating, sleeping and the ability of the infant to be consoled**. Our goal is for a multi-disciplinary team to support, encourage and educate families so that we can minimize pharmacologic treatments. Depending on the needs of the families, we will strive to make sure that appropriate resources are in place during the admission. Because OENs are at high-risk, we are developing a more structured discharge process to ensure that these families will thrive. As the primary care physicians who will be accepting care of these babies, we are hoping to partner with you and your staff to make this a smooth transition.

If you have any questions please do not hesitate to contact us.

Sincerely,

MNO-Neonatal QI Leads