

NOWS the Time: Eat, Sleep, Console A Quality Improvement Project Update

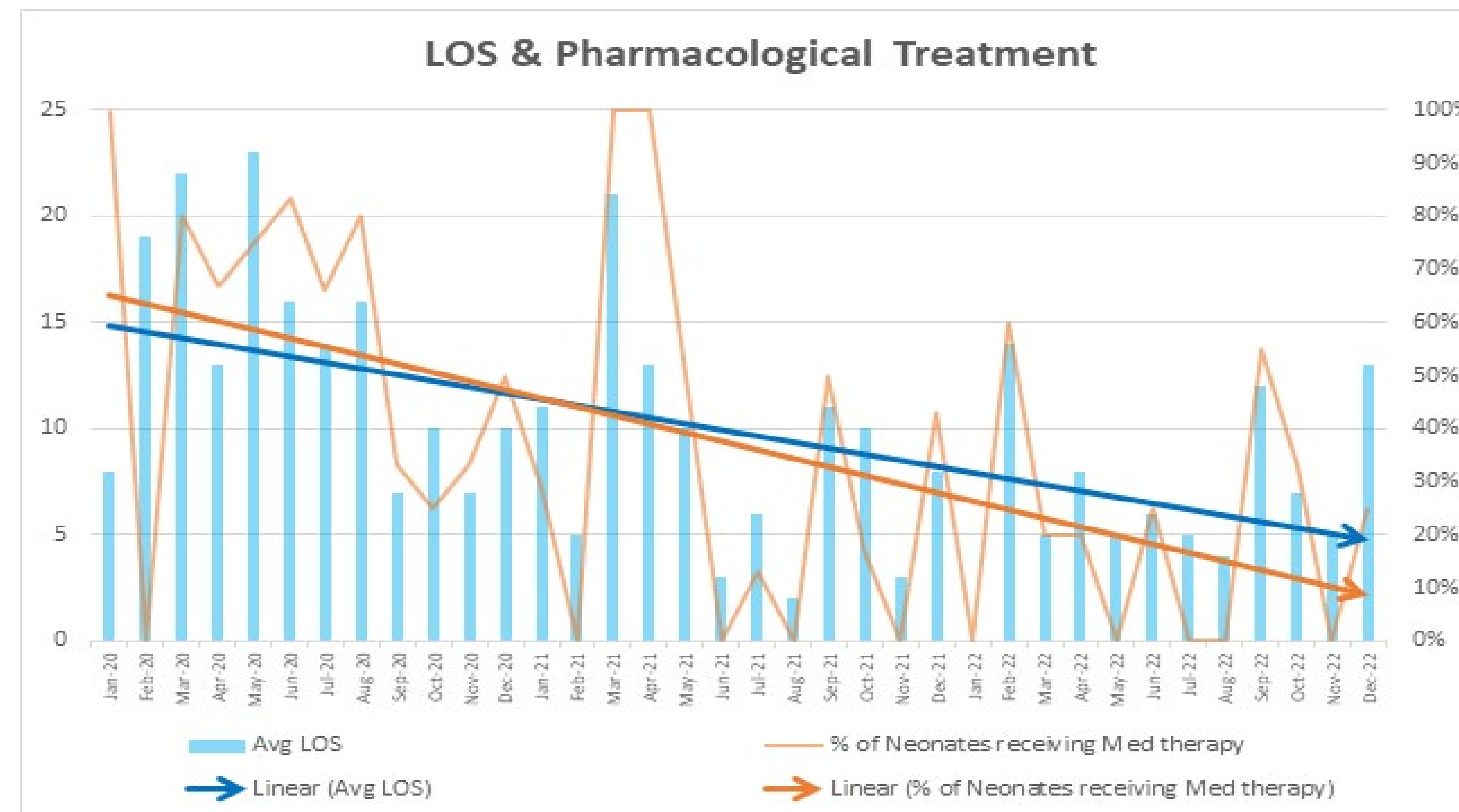
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The goal of this quality improvement project was to decrease hospital length of stay (LOS) by one day and decrease the use of pharmacologic therapy by 20% for newborns \geq 35 weeks gestation with Neonatal Opioid Withdrawal Syndrome (NOWS) by June 30th, 2021.

Due to the opioid epidemic, an increasing number of infants are born with NOWS. Before the project, newborns were treated with pharmacologic therapy in a specialized nursery and LOS was two to three weeks. NOWS newborns who room-in with the mother need less pharmacological treatment and have a decreased length of stay.



UPMC Altoona



A Parent Partnership Unit (PPU) was implemented to focus on mothers and newborns using the Eat, Sleep, Console (ESC) assessment and using targeted non-pharmacologic soothing strategies to decrease length of stay and need for pharmacologic treatment.

Interdisciplinary meetings utilized the Plan Do Study Act method to discuss project goals, needs, and evaluate progress throughout the year. Newborn data was collected from financial reports including identification of newborns with an ICD-10 codes P04.49, P04.14, and P96.1, LOS, and use of pharmacologic treatment.

Updated Results

Post project implementation, the length of stay decreased by 5.1 days and the use of pharmacologic therapy decreased by 24%. We are excited to report that we have sustained the continued decline in the use of medications and LOS for NOWS infants as the graph above shows.

This ESC model shifts the emphasis to the caregiver and non-pharmacologic measures as the primary treatment plan. Nursing provides support and education to the parents rather than medication. Keeping the mother infant dyad together is the infant's best treatment.