Skin to Skin: Every Baby Wins!

The Problem
- STS holding, or “Kangaroo Care,” is a practice where infants are placed directly against their parent’s bare chest
- Increasing evidence of the benefits for infants and parents:
  - Cardiorespiratory stabilization, improved thermoregulation
  - Decreased infection rates
  - Reduced morbidity (poor growth, LOS) & mortality
  - Physiologic sleep cycle promotion
  - Decreased parental stress, improved breast feeding
- STS holding is now a standard of care therapy in neonatal units worldwide, yet implementation remains a challenge

Aim / Goal
Our team set out to increase Skin to Skin rates in all infants admitted to the NICU.

Aim: Increase our rate of infants receiving at least one STS episode per day from 19% to 40% between January and June of 2015.

Interventions

Concept #1: Flip the Culture
- At project initiation, our unit treated STS as a special circumstance or the exception
- We worked to change our culture to instead embrace STS as the rule
- Changed policy & developed staff education modules
- Visual reminders of the benefits of STS & “Blitz” in monthly NICU newsletter
- Discussion twice daily at team meetings with active trouble shooting as problems arise

Concept #2: Treat STS as Medicine
- STS order included in standard admission order set
- STS events incorporated into nursing hand off
- Discussed at rounds: duration, frequency & tolerance

Concept #3: Increase Awareness
- Host Kangaroo-a-thons
- Photos of our families doing STS throughout the unit
- Discuss during family-centered rounds
- Post our run charts in the NICU for everyone to see

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The Team
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Results / Progress to Date
- At least one STS per day rose from 20 to 37%, fell slightly, and remains stable at 32%
- Overall STS rate rose to 0.8 events per patient day, fell with census demands, now at 0.6
- Trend towards more VLBW infants being held ‘early’ (at <48 hours of life)
- Overall time to 1st hold has decreased for VLBW infants

Lessons Learned
- Identified numerous challenges along the way, including staffing and equipment needs, and educational opportunities for families
- Noted labor intensity of Skin to Skin holding; requirement for nursing support to continue this practice during periods of high census and acuity
- While initial momentum lead to significant improvements, sustaining that progress remains a challenge
- Anticipated challenges with infants in critical condition, but we noted a paradox of recovering preemies being held swaddled, rather than skin to skin, despite the fact that the benefits in this group persist

Next Steps
- Reinforce ways to maintain best practices for STS even during high census periods
- Utilize other staff resources for help with transfer
- Educate/engage parents on benefits for their infants and learning independent transfer
- Identify ways to increase STS in the growing preemie population
- Institute tracking system for discussion of STS on rounds
- Incorporate STS discussion in antenatal consult and first Family Meeting
- Observe effect of increased STS on breast milk production rates

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Aim Statement:
Increase % NICU patients with at least one STS event from 20% to 40%, between January & June 2016

Key Outcome Measures
- Time to First Hold
- Average % Infants with at least One STS Event per day
- Average Number of STS Events/Day

Changing the NICU Culture:
Skin to Skin becomes the Default Mode

Increasing Parent Involvement:
Family Centered Care Model

Primary Drivers

Secondary Drivers

Knowledge of STS Benefits

Exclusive STS Policy

Increase Awareness

Empowering Parents

Change Concepts

Review STS on Rounds

Staff Education

Re-write Policy to be Inclusive

NICU April Newsletter

Monthly Updates

Posters with Benefits

STS Buttons

Photos of STS

Parent Education

Kangaroo-athons

Incorporate in PNC
Infants with At Least One Skin to Skin Event per Day In 2015

- 31%
- 20%
- Change Concept #3
- Change Package #2
- Census Peak
- Change Package #1

Month

Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec
VLBW Infants Held Early in 2015

- UCL: 100%
- CL: 70%
- LCL: lowest control limit

- January: 34%
- February: 20%
- March: 15%
- April: 25%
- May: 50%
- June: 65%
- July: 90%
- August: 75%
- September: 50%
- October: 25%
- November: 15%
- December: 30%