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A quality improvement initiative to improve the duration of kangaroo mother care in territory care neonatal unit of south india

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Background: India has the highest number of preterm births and maximum number of deaths due to prematurity. Chengalpattu Government Medical College had 11,593 deliveries annually in 2020, of which 2252 of neonates were Low birth weight. 2016 Cochrane review concluded that Kangaroo Mother Care reduces the morbidity and mortality in low birth weight infants. The average duration of KMC in our unit was around 4.6 hrs/ baby/ day.

Objective: To improve the duration of KMC in stable low birth weight babies are from the short Time duration to the continuous time duration (> 12 hrs) over in a 8 weeks.

Methods: The implementation phase was conducted during January and February, 2021. All babies with birth weight < 2 kg and who were stable were enrolled. QI team included staff nurses, nursing-in-charge, resident doctors and consultants. Potential barriers were listed using Fishbone analysis. Various possible interventions were identified and a priority matrix was formed to decide the sequence of introduction of changes. The following measures were subsequently tested by multiple PDSA cycles. Ensuring the availability of KMC charts, Combining KMC chart with individualized weight chart, Documentation of KMC duration in case sheets, Increasing number of KMC chairs, Opening of Mother- NICU, KMC slings for mothers, Education videos in local language & Rewards for mothers.

Outcome indicator: Duration of KMC, recorded by bedside nurses on daily basis. A total of 86 newborns were enrolled. At the end of 8 weeks, average duration of KMC increased to 16.6 hrs/ baby/ day. The intervention which was most useful in increasing KMC duration was opening of M- NICU. We were able to sustain the improvement at the end of 6 months. Sequential measures taken as a part of QI initiative, helped to increase the average duration of KMC from 4.6 to 16.6 hrs/day, without much additional resources.

Biography

Dr Sandeep Tilwani is MD in pediatrics, and currently pursuing DM Neonatology (Super Specialty training) at Chengalpattu Medical College, Tamil Nadu, India. He has 7 years of working with sick newborns. He believes in promoting low cost, high impact interventions to improve the level of neonatal care in LMIC. KMC is beyond doubt one of the established ways to care for LBW infants. Chengalpattu Government Medical College is a public sector hospital that caters to around 12,000 deliveries annually. Of these around 2500 infants are born LBW. So this study was primarily undertaken to improve the duration of KMC in hospital for these preterm LBW infants.