The Wisconsin Neonatal Perinatal Quality Collaborative

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Janice Ancona MSN, RN is a clinical Nurse Specialist – Neonatal Intensive Care
Unit, Wheaton Franciscan – St. Joseph Campus. She influences the direct and
indirect care of patients and families, leads the improvement of quality of care
and outcomes for patient populations and community health. Janice also contributes to the growth and
development of nurses and the nursing profession through research, education, and coaching.

NICQ Symposium, NAS Homeroom, Friday, October 2, 2015
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Objectives:
Identify 3 opportunities to standardize care processes, and further test them locally in small PDSA
cycles.
Identify the potential for completed improvement cycles to improve value defined as quality/cost.
2015 Initiative 1
8 WINpqc NICUs participate in the VON iNICQ 2015: NAS*

GOAL
Decrease need for pharmacologic treatment.

METHODS
Family engagement (prenatal education, holding)

RESULTS
Baseline Oct.-Dec. 2014  n = 81  43% meds
Initiative Jan. – Aug. 2015  n = 179  35% meds

2 TOP PERFORMERS
✓ mostly Subutex, very few methadone  n = 29  31%
✓ initiated intentional use of aromatherapy  n = 44  18%

*All Level III NICUs include their Level II referral centers in NAS initiatives

2015 NAS Initiative 2
Family Preparation and Engagement

GOAL
To decrease incidence and severity of symptoms through increased family preparation and engagement.

METHODS
• Standardized flip chart for prenatal education of parents
• Cuddle & hold by family/supports and volunteers (*# and hrs.)
• Admission and discharge surveys to identify most frequent sources of information for parents, effectiveness of pre-delivery and in-hospital strategies, readiness for discharge, and satisfaction with services

Admission Survey
92% Know s/s, scoring, comfort techniques, and POC.
62% prenatal educ.; most from OB provider.
55% Plan to breastfeed.
54% Worried about how they and baby might be treated.

Discharge Survey
100% “right amount” of information; feel ready for discharge.
100%. Held infant as much as they wanted
88% A quiet environment helped parents feel calm and capable
76% Infant LOS shorter than or about as expected.
75% Felt they were not treated differently
50% Describe their experience in the quiet room as “great”.

Bottom line?
Getting prenatal education, babies are being held, parents are less angry.

2015 WINpqc NAS Initiative 3
September 2015 – March 2016

• Medication dosing frequency of q 2 to 4 hours.
• Routine, intentional use of aromatherapy
• Trial NAS scoring form modified from an adapted version of Finnegan.*

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New - Wisconsin Perinatal Quality Collaborative

The Wisconsin Association for Perinatal Care in collaboration with the WI Division of Public Health:

Will create a statewide perinatal quality collaborative to:

- Standardize maternal and infant protocols across the continuum.
- “Implement a health care/public health partnership to strengthen maternal and infant health and improve infant mortality.”

DHS Grant $100,000 / year for 2 years

Develop infrastructure and conduct beta initiative (hypertension).

WINPQC: as the neonatal arm of the WI collaborative?