



*“Partners in Perinatal Quality”*

**August 2010**

**A long awaited invitation...**

**Human Milk for the Very Low Birth Weight Infant**

**Information Webinar and Project Application**

In March 2009, you, the members of the Tennessee Initiative for Perinatal Quality Care (TIPOC) voted to develop and implement a quality improvement project focused on the use of human milk in the very low birth weight (VLBW) population. The development team has been hard at work in the intervening 18 months, and they would like to invite you to join them for the kick-off of this much-anticipated statewide project for all 27 NICUs in Tennessee.

The initiation of enteral feeding is a widely recognized challenge in the VLBW population as the intestines, like the lungs are not sufficiently developed to support routine extra-uterine function at birth. Multiple lines of research suggest that initiation of feedings with human milk promotes a more rapid transition to mature intestinal function while reducing other risks associated with prematurity including infection and necrotizing enterocolitis. Recent reports of the protective effect of even small amounts of human milk in the first weeks of life, suggest substantial reductions in morbidity, mortality, length of stay, and hospital charges may be possible by improving usage of human milk for enteral nutrition. (Bisquerra 2002, Meinen-Derr 2009)

The implementation of this potentially better practice is hindered by multiple systems factors. In the 2008 TIPQC-VON report, less than 20% of VLBW infants in Tennessee were discharged from the NICU feeding human milk. Though challenging, improving the rate of human milk feeding is clearly possible. The project leader for this project, The Med, increased their rate of

human milk usage from less than 20% to greater than 75% using evidence based practices incorporated into this project's tool kit.

On **August 31<sup>st</sup> at 10 am CST**, TIPQC will host an informational webinar for centers considering joining this collaborative effort. This webinar will provide a broad overview of the project, the toolkit, and the benefits of approaching this challenging area in an IHI style Breakthrough Collaborative.

On the call, Dr. Reddy Dhanireddy and Dr. Steven McElroy along with the development teams from the The Med, Monroe Carell Jr. Children's Hospital, East Tennessee Children's Hospital, and Parkridge East Hospital will be available to review the evidence basis for this project and to share their preliminary experience using the toolkit as pilot centers.

To participate in this first informational phase of TIPQC's HM4VLBW you must register for this webinar by RSVP to [Brenda.Barker@TIPQC.org](mailto:Brenda.Barker@TIPQC.org). An invitation to join the meeting via WebEx will be sent. We encourage prospective participants to assemble all interested potential team members for this event. Formal project applications will be sent just prior to the webinar for review along with the Project Tool Kit, Protocol, and an example IRB submission form.

All 27 NICUs in Tennessee are encouraged to attend and to participate in this project.

## **State Wide Kick Off**

Join us on **September 20 for the first face-to-face learning session** as we officially kick-off the HM4VLBW project! At the meeting on September 20<sup>th</sup>, teams will arrive having completed a review of their current practice based on the pre-work webinar (date TBA) in order to be prepared for a fast paced day in which they will review the evidence, complete an introduction to QI methodology, explore the tool kit, and begin working on their first PDSA cycle. We look forward to your team adding their energy, expertise and enthusiasm to this statewide effort.

### **Timeline for HM4VLBW Kick-off**

- Information Webinar, September 20<sup>th</sup>, 10 AM CST
- Application Deadline, September 10<sup>th</sup>
- RSVP for Learning Session #1, September 10<sup>th</sup>
- Learning Session #1, September 20<sup>th</sup>, Nashville, 9 AM-5 PM CST

Success will depend on many factors, not the least of which is multi-disciplinary participation on the local and state level including families,

lactation consultants, nurses, hospital administrators, and payers. Please share this email and encourage you colleagues to actively participate!

## **Project Updates**

All current project updates can be found on our Projects Page at [www.TIPQC.org](http://www.TIPQC.org).

### **OB—Reducing Elective Deliveries before 39 Weeks**

Regional OB change teams forming or in progress in North-East, Mid, and West Regions. <http://www.tipqc.org/projects>

### **OB—TN Breastfeeding Promotion**

Change package being drafted, data structure ready for testing in pilot. <http://www.tipqc.org/projects>

### **NICU—Human Milk for the Very Low Birth Weight Infants Project**

Join the webinar and state-wide “Kick off!” <http://www.tipqc.org/projects>

### **NICU—CLABSI Reduction**

First state aggregate data was shared during Summer Regional Learning Sessions. <http://www.tipqc.org/projects>

### **NICU--Admission Temperature Project**

Teams continue to assess sustainment data and renew sustainment goals. <http://www.tipqc.org/projects>

### **NICU—“How’s Your Baby?”**

Pilot Centers beginning to test Dr. Bill Edward’s “How’s Your Baby?” parent data entry tool. <http://www.tipqc.org/projects>

### **NICU--Golden Hour**

First Development meeting planned for this fall. <http://www.tipqc.org/projects>

## **Feature Hospitals/QI Collaboration**

Please submit brief highlights along with photographs of the work that your hospital is doing to be featured in our website and monthly e-zines. We know you are hard at work and would like to recognize your efforts.

Please note that we have added a calendar feature to our website, where these dates and others can be found at <http://www.tipqc.org/calendar>.