

Spreading Eat, Sleep & Console Across UPMC Women's Health Service Line

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Background: UPMC WHSL Journey

- Pregnancy Recovery Center (PRC) July 2014
- Women's Recovery Center (WRC) May 2017
- Perinatal Addiction Consultation Services (PACES) Oct 2017
- Created Parent Partnership Unit (PPU) non pharm care by mom 24/7 in July 2018
- Introduced to Elisha Wachman by Deb Bogen Oct 2018
 - Elisha invited team to Mass Medical Society ESC workshop in Boston Jan 2019
 - In response, Elisha offered to do Grand Rounds at CHP & a training workshop Magee-Womens May 2019
 - Developed multidisciplinary ESC team meetings (PRC, SW, lactation), QI project
- Implementation of ESC pilot on PPU UPMC Magee-Womens Hospital August 2019 with average outcome 5.6 day LOS
- Spread across the WHSL 14 hospitals –one hospital at a time
- COVID cancelled in-person training April 6th
- Conducted training for 4 hospitals May 2020
 - Readiness assessment, planning meetings, training mirrored Boston workshop
- WHSL Perinatal SUD Committee June 2020



What are we trying to accomplish?

Locally:

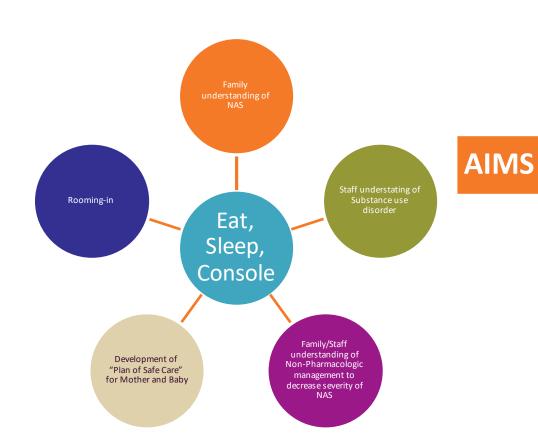
- Decrease hospital length of stay by 1 day for all infants ≥ 35 weeks gestation with Neonatal Abstinence Syndrome (NAS) by December 31, 2020.
- Decrease initiation of pharmacologic therapy by 20% in all infants ≥ 35 weeks gestation with Neonatal Abstinence Syndrome by December 31, 2020.

Systemically:

- Improve the care of substance exposed newborns across the health system
- SPREAD AND SCALE-UP SYSTEM-WIDE



ESC Model as a driver of change



Improve identification and use standardize coding and documentation for substance exposed newborns and infants diagnosed with Neonatal Abstinence Syndrome (NAS)

•- Standardize definition of Substance Exposed Newborns (SEN)

•- Standardize definition of NAS

•- Standardize coding and documentation for SEN and NAS

Improve staff understanding of Substance use Disorder (SUD) and NAS

- •- SUD... partner initiative
- •- Educate staff regarding NAS
- •- Provide family education about NAS

Implement Eat, Sleep, Console (ESC) model as

an assessment tool for NAS

Ensure the safe discharge of mother and baby

- Educate staff on ESC (Train the trainer model)
- Develop family education on ESC
- •- Identify a physical space for the mother to provide care for her baby
- •- Electronic Health Record
- Mother... partner initiative
- Partner with families to establish an **in**patient "plan of safe care"
- Partner with families to establish an out patient "plan of safe care" - Electronic Health Record



System-wide Challenges

 System-wide engagement with limited face-toface interactions

• Standardization in the setting of variable availability of resources (i.e. physical infrastructure, staffing, etc.)

 Standardization in the setting of variations in clinical practice

Potential steps: Local Changes

- What can we do well remotely... <u>video</u> conferencing?
- What can we not do well remotely?
- Opportunities to share between sites...
 utilizing technology.
- Identify the benefits of having rooming-in available? How do we ADAPT?

- Structured and phased approach to developing, replicating, and evaluating care in multiple sites (small-scale test of change)
 - What can we adopt?
 - What do we adapt?

