# Quality Improvement Initiative for KMC in NICU

Megha Kadam, Jiji Thomas, Merinta Jose, Harshitha Gloria, Suman Rao

Department of Neonatology, St. John's Medical College and Hospital, Bangalore, India.

#### **BACKGROUND**

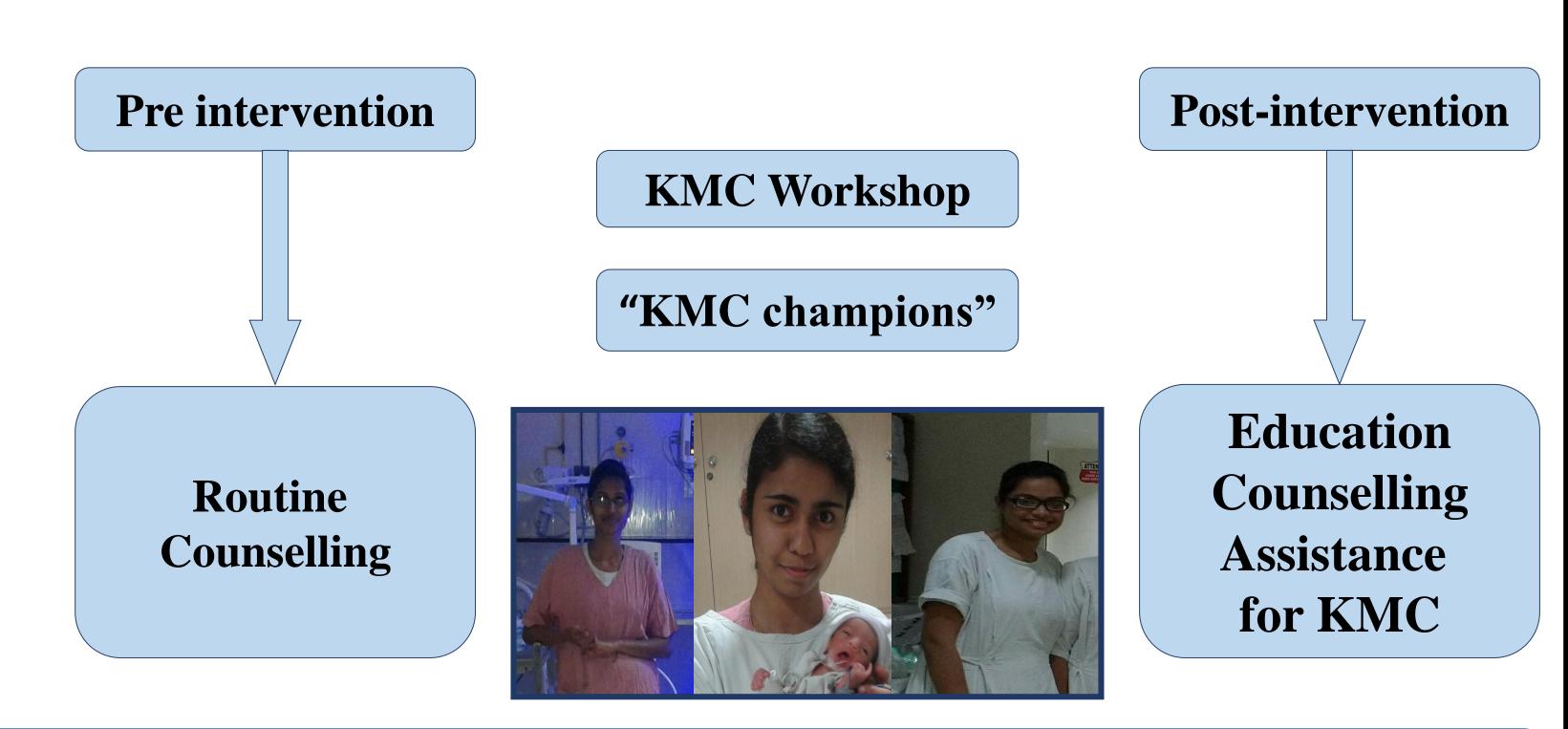
Despite Kangaroo Mother Care (KMC) being considered a game changer in reducing newborn mortality and morbidity, there is still poor coverage of eligible babies and duration of KMC is not optimal. Hence, this QI project was undertaken in our NICU.

### AIM

- To improve "Successful KMC" by Quality Improvement initiative comprising of counseling, education, and video demonstration to the parents
- "Successful KMC" was defined as > 8 hours/day of KMC by discharge.

#### METHODOLOGY

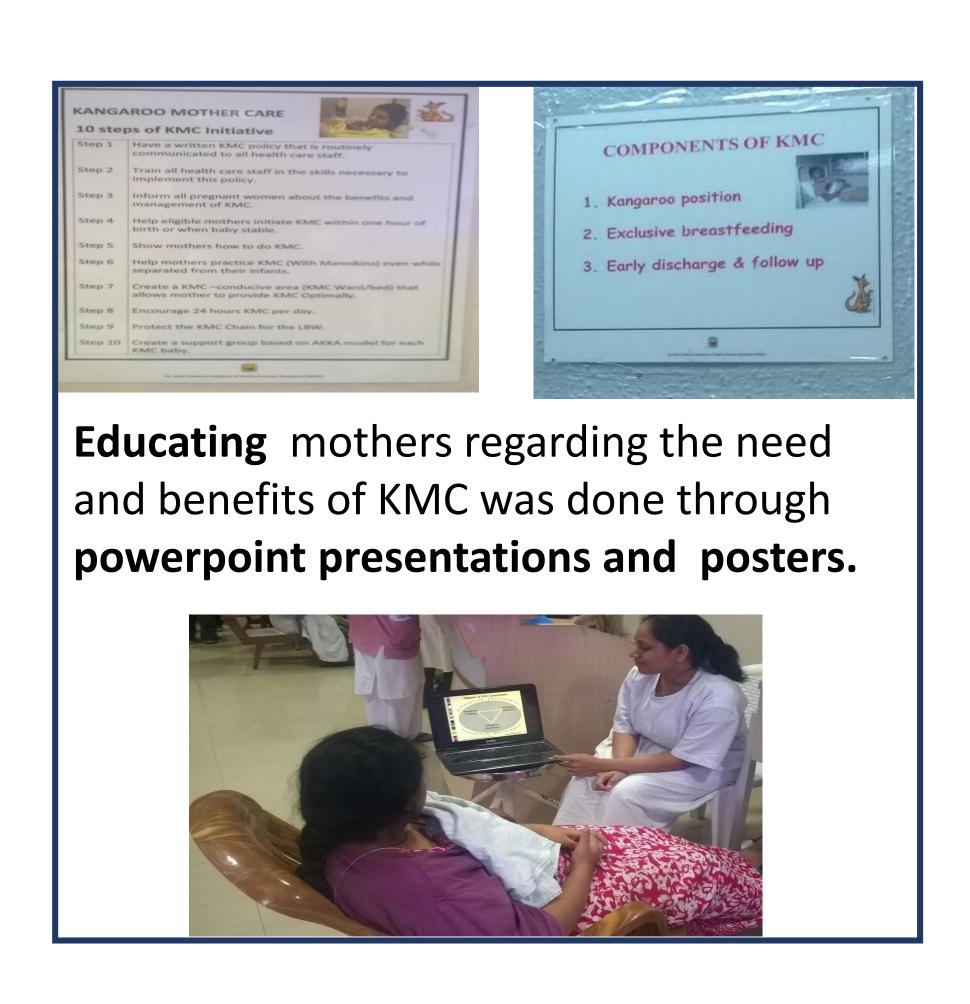
- Study design Quality Improvement Study for KMC, pre-post design
- Study duration July November 2015.
- Place of Study NICU, St. John's Hospital
- Inclusion criteria Low birth weight babies <2500g.

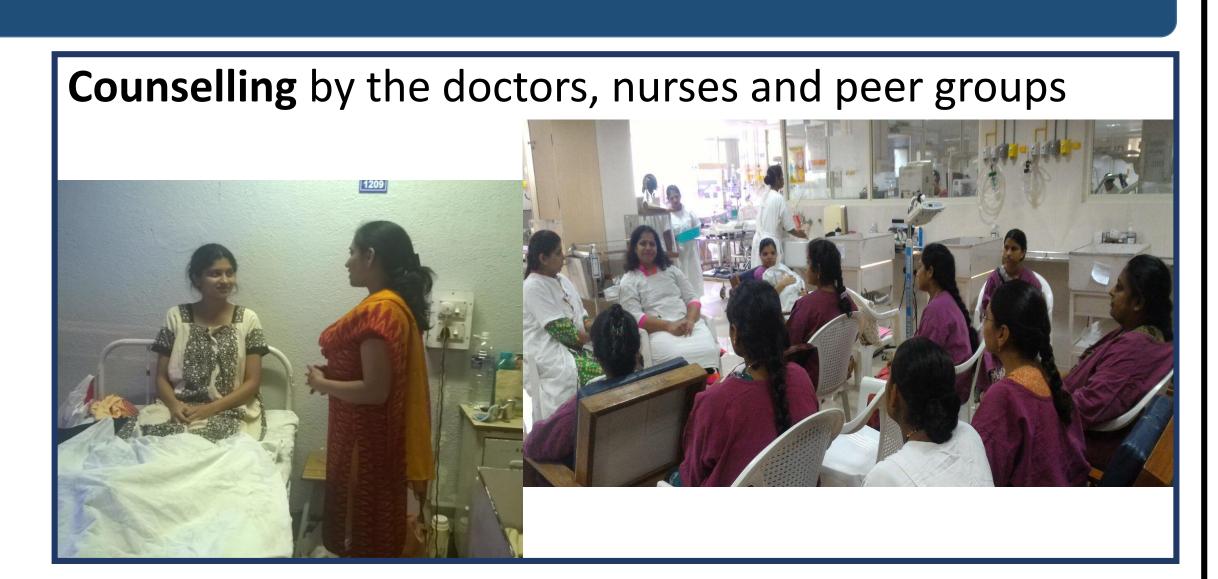


#### INTERVENTIONS





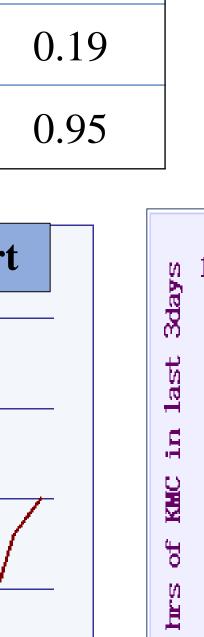


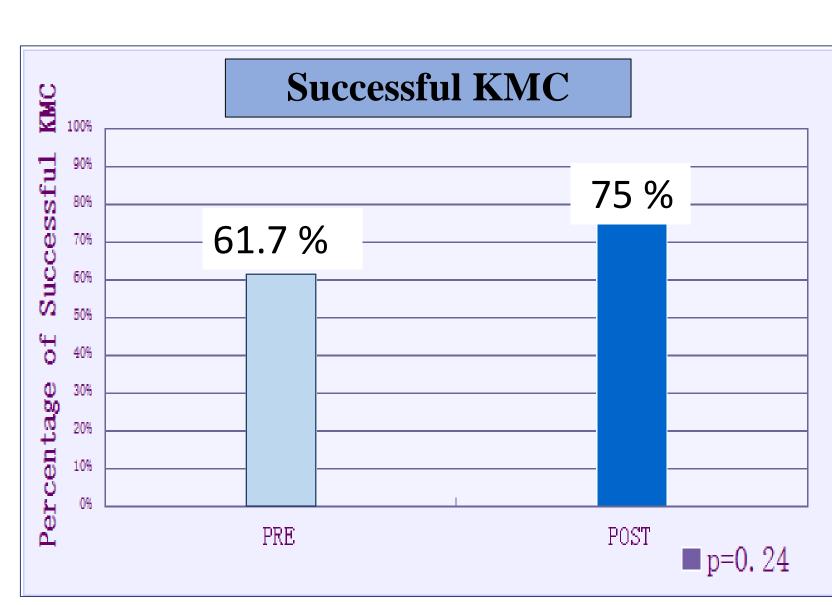


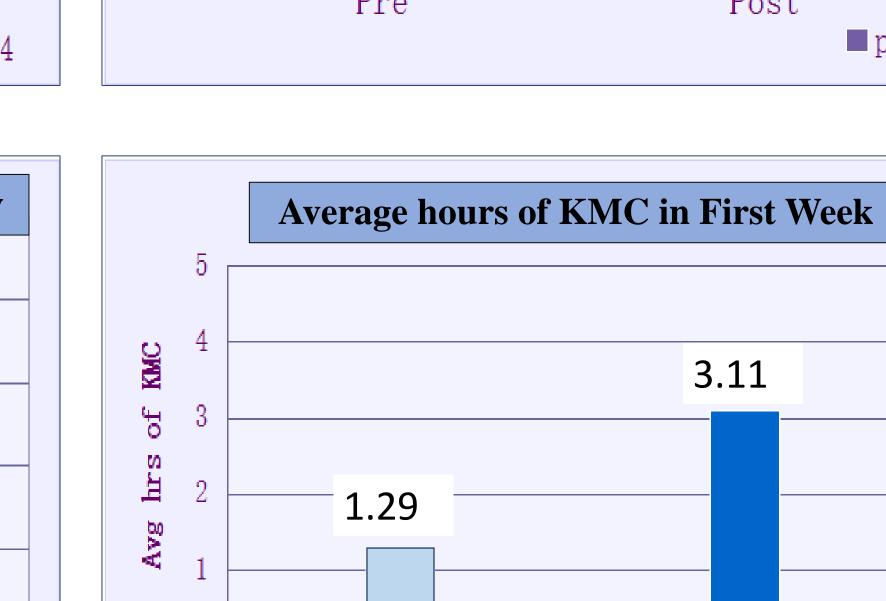


#### **RESULTS**

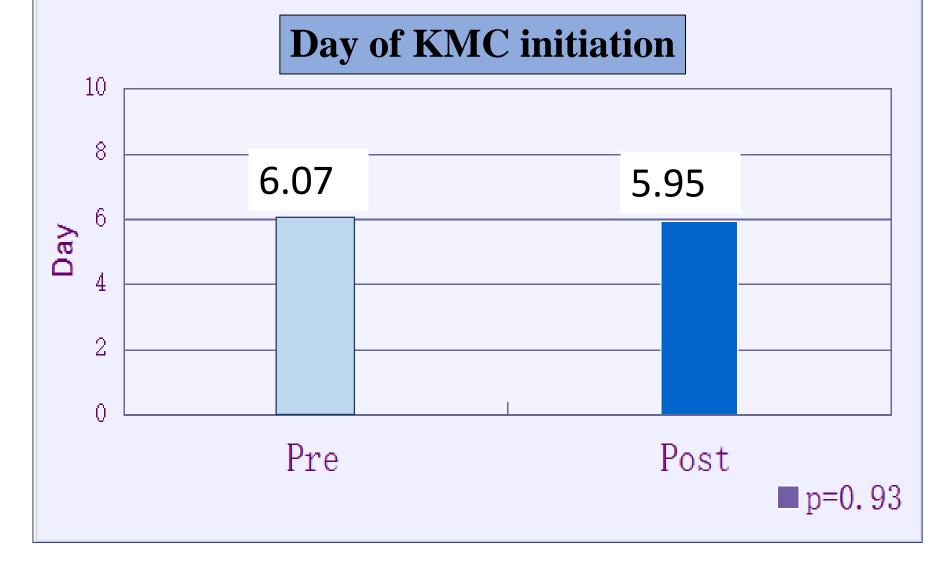
Variables	Pre intervention (n = 13)	Post Intervention $(n = 25)$	p value
		(	
Maternal age (yrs)	$27.96 (\pm 4.70)$	$26.47 (\pm 4.78)$	0.38
Vaginal Delivery	46%	24%	0.27
LSCS	54%	76%	0.45
Birth weight (g)	1521.6 (±393)	$1354.6 (\pm 338)$	0.19
Gestational age (wk)	$32.03 (\pm 1.7)$	$32.01 (\pm 2.7)$	0.95







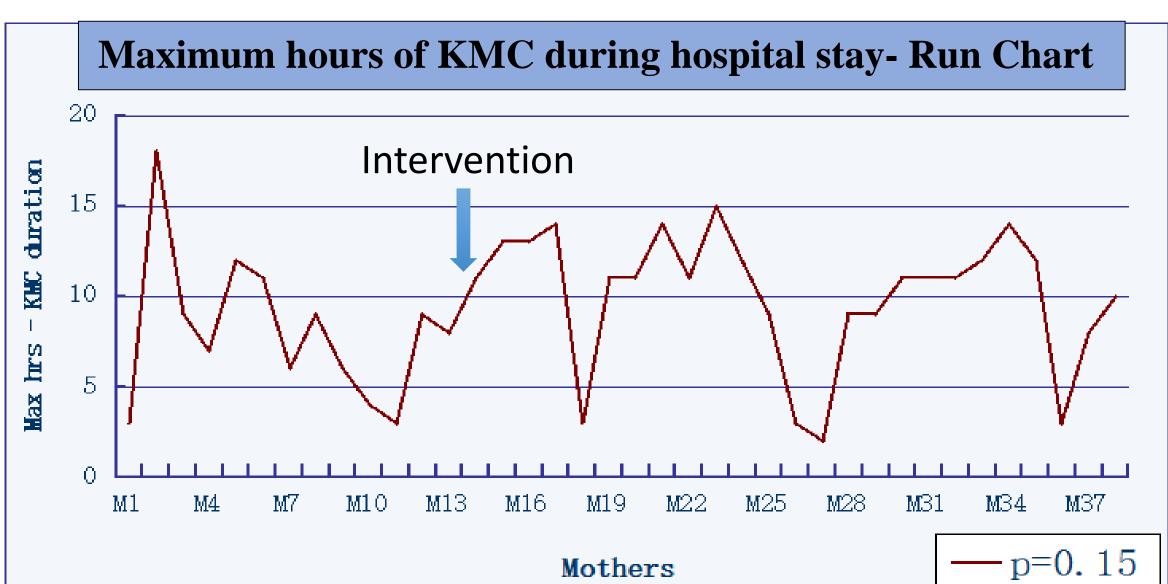
Pre

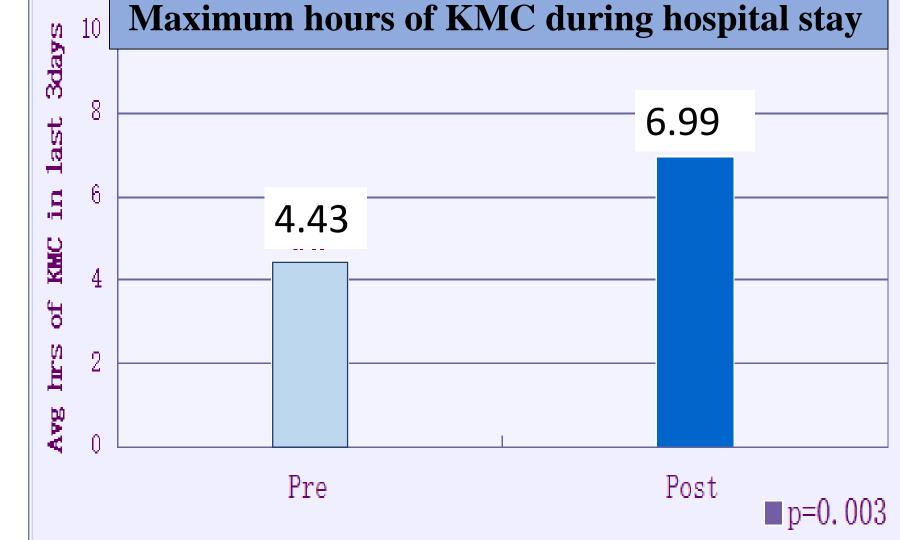


3.11

Post

■p=0.003





## CONCLUSIONS

- \* Implementing prolonged KMC still remains a challenge.
- \* Education, counselling and video demonstration improved KMC duration marginally.
- The QI initiative needs to be sustained and further strengthened to improve the duration of KMC.