

Resetting the Clock for Oral Immune Therapy

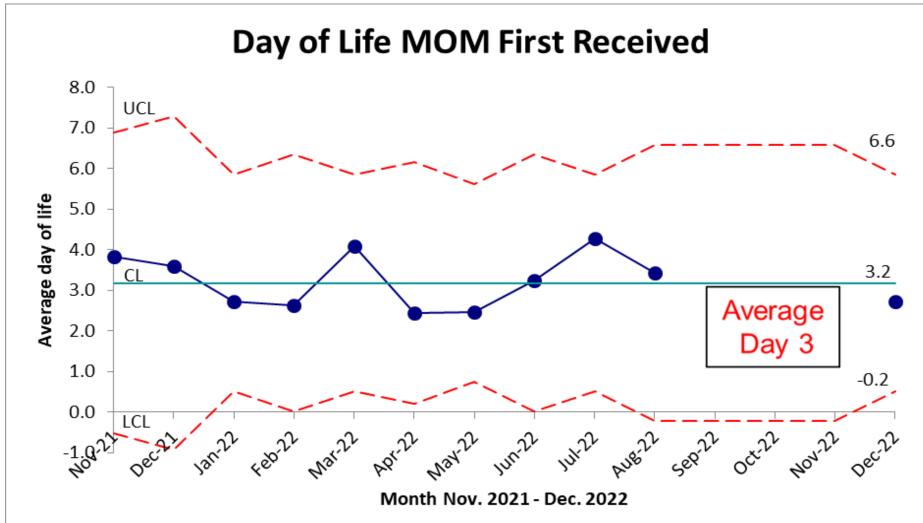
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Quality Improvement (QI) Aims

- **Overarching Aim:** By 2025, 80% of infants born <33 weeks gestational age (GA) receiving mother's own milk (MOM) at 28 days of age
- **Project Aim:** Decrease the time to first Oral immune therapy (OIT) using MOM within 24 hours of life in 50% of infants born <33 weeks GA

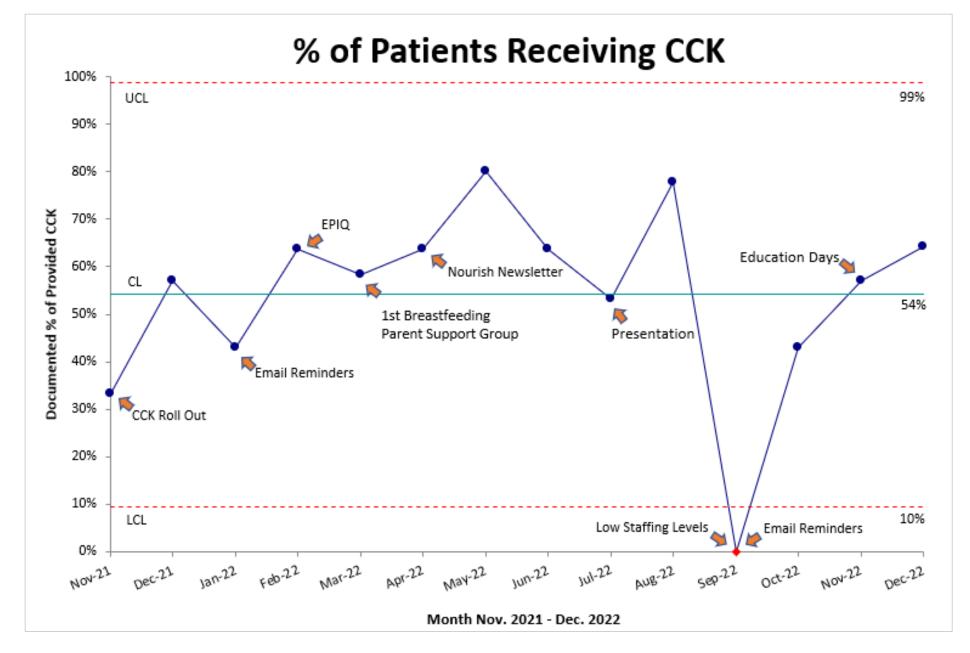
Background

- Literature reviewed to determine best practices to decrease time to MOM
- Early receipt of MOM associated with sustainment of breast feeding
- Age at receipt of first MOM was audited (**See fig. below**)



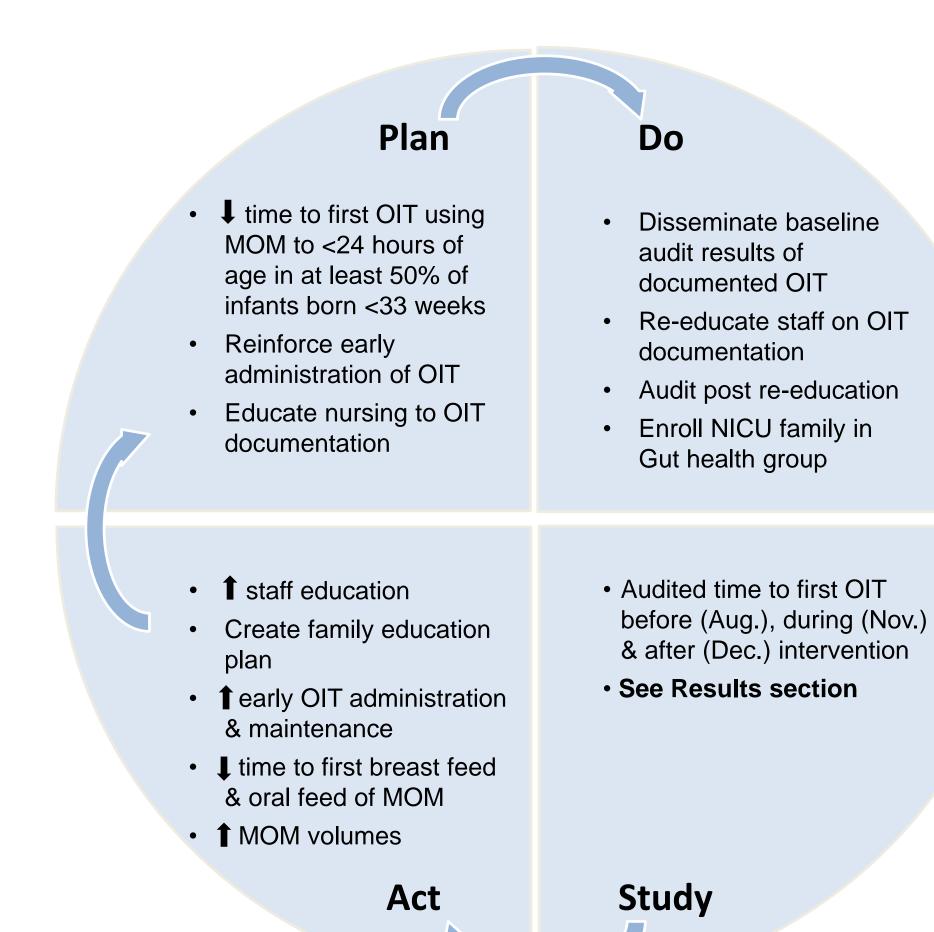
EPIQ 2021-2022 PDSA: Improve and maintain colostrum collection kit (CCK) delivery to all mothers with infants admitted to NICU

• Goal of 50% met, highest month 80%. (See fig. below)

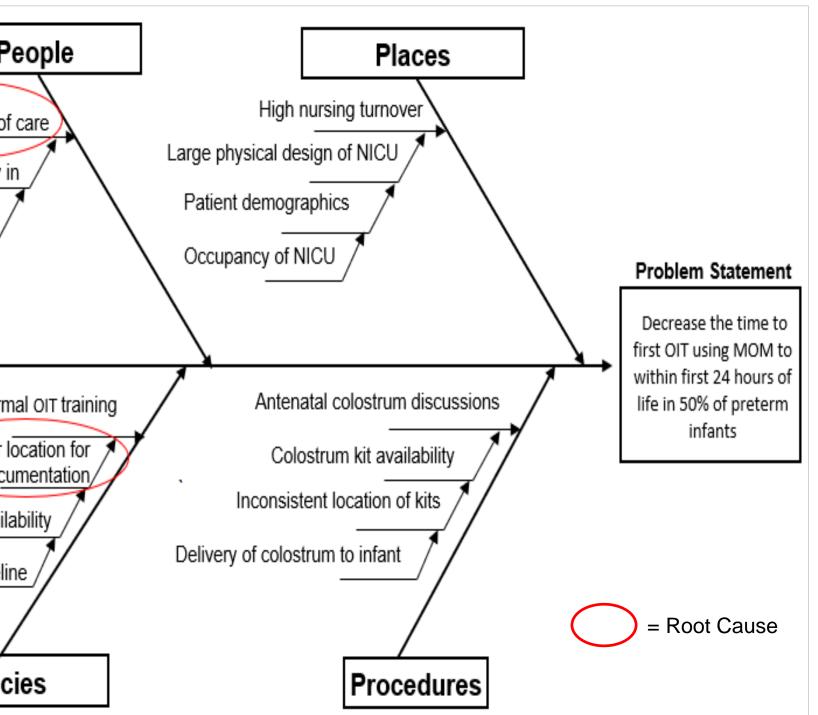


- Gut health group sensitized team to improvements needed to support OIT
- Providing OIT is natural next step for infant after receiving MOM from CCK
- Decision to target OIT, as multiple benefits including enhancing immune protection, gut maturation, feed tolerance, prevention of ventilator associated pneumonia, while supporting early receipt of MOM and increasing parental involvement

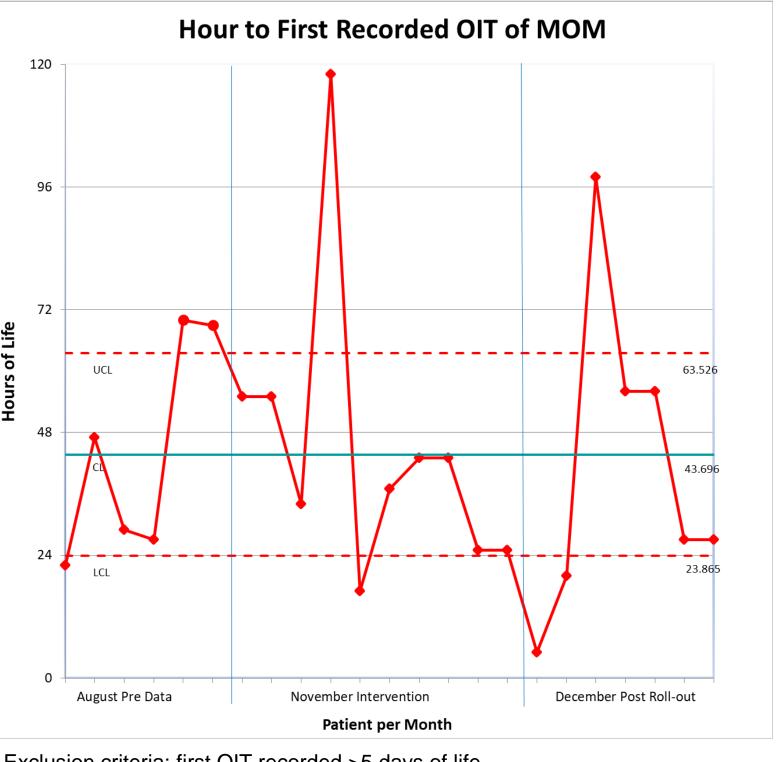
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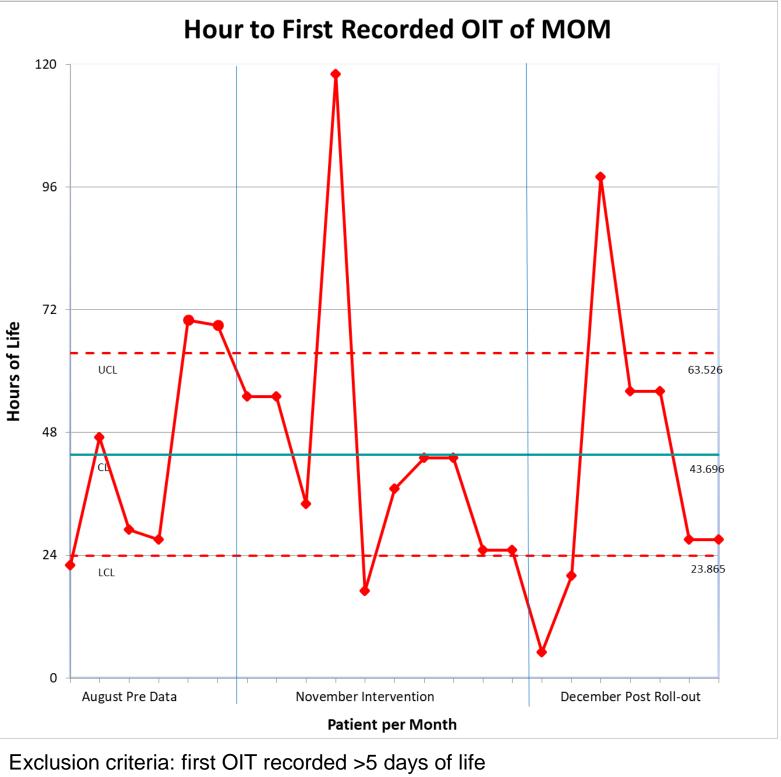


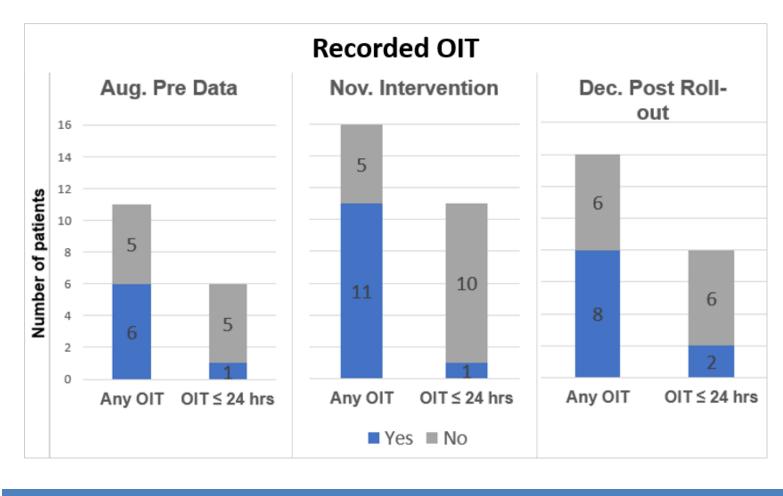
Fishbone Driver Diagram











Conclusions & Next Steps

- Rate increased from 17% to 25% post intervention
- Goal of 50% was not achieved
- Next steps:
 - Develop early MOM bundle

 - delivery
 - PDSA cycles to:

Acknowledgements: Health Sciences Centre Winnipeg Gut health group, EPIQ Committee members & NICU staff





Results

• Overall documentation of OIT increased after the QI project

Staff education to improve time to first OIT, including: importance, procedure and updated guideline Parental education including: procedure and OIT

• Improve MOM volumes

• Improve documented time to first MOM