



Eat, Sleep, Console (ESC) Monitoring

Implementing a strengths-based approach to Neonatal Abstinence Syndrome

A Performance Improvement Project at Brattleboro Memorial Hospital

PROBLEM STATEMENT/PURPOSE

Neonates at risk for Neonatal Abstinence Syndrome (NAS) are assessed at regular intervals for opioid withdrawal symptoms. The transition from the Modified Finnegan's Score, which assigns points for each symptom of withdrawal (ranging from sneezing to irritability, to seizure), to the Eat, Sleep Console (ESC) method of assessment allows families and care-givers to focus on a strengths-based approach to caring for this vulnerable population. The ESC method works to maximize the non-pharmacological care of newborns and promoting positive parenting skills through the hospital stay, all while staying focused on the newborn's ability to eat, sleep and be consoled.

METHODOLOGY/INTERVENTIONS

- Developed an ESC documentation template in the EMR.
- Revised the Management of the Newborn at Risk for Neonatal Abstinence Syndrome (NAS) policy
- Provided medical staff education on ESC monitoring and interventions, documentation, and medical management.
- Adapted the parent education booklet.
- Provided ongoing staff support for patient education and documentation.
- Introduced PRN morphine dosing.



TEAM MEMBERS

Birthing Center: Leah Nussbaum, RN, Erinna Wichland, MSN

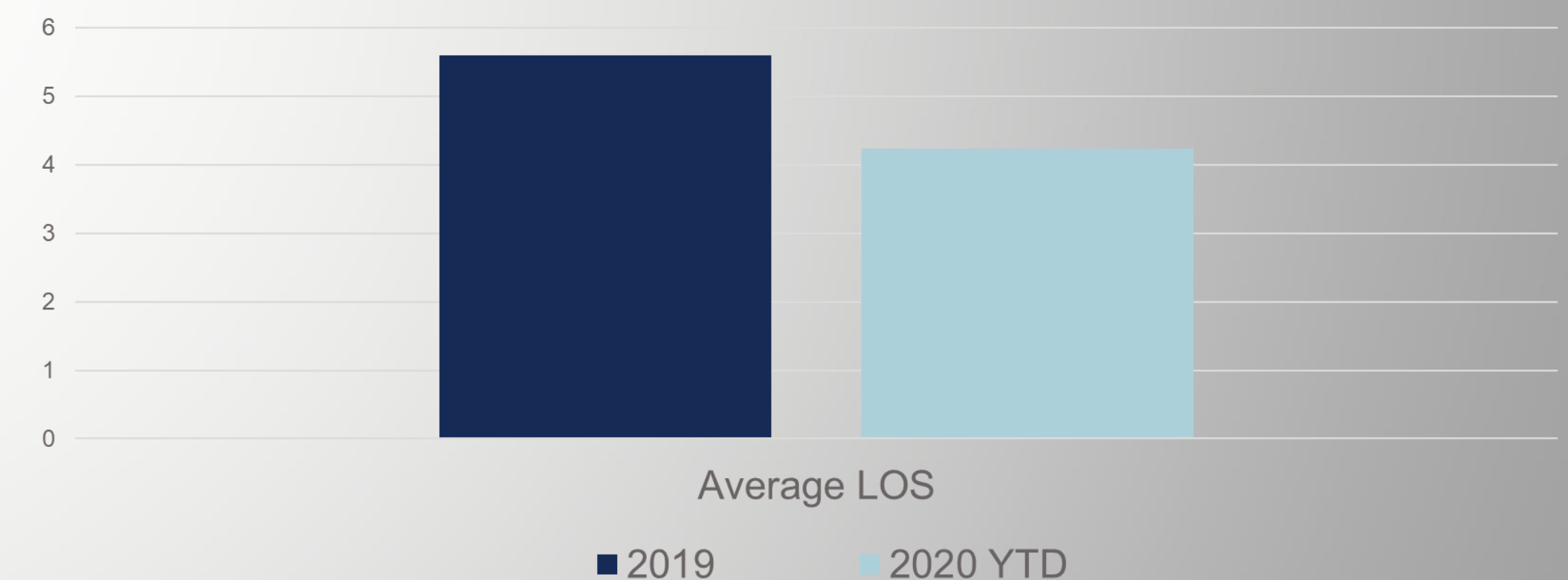
Pediatrics: Heather LeSage-Horton, MD

IS: Amber Fitzgerald

Marketing: Maeve Shaughnessy

RESULTS

- Average LOS for infants exposed to opioids prenatally was 5.6 days in 2019 and 4.23 in 2020 (ESC roll out was 1/2020).
- Increased parent participation in infant care.



CONCLUSIONS/RECOMMENDATIONS

Overall positive feedback from healthcare providers and families. Ongoing data collection is needed to fully assess results from this change in practice.