The purpose of this study is to investigate specific quality of care measures and their impact on the incidence of Kangaroo Care (KC) in premature infants being treated in neonatal intensive care units.

Will specific quality of care measures increase the rate of Kangaroo care occurrence in premature infants?

1. To develop and implement strategies to increase Kangaroo Care occurrence in premature infants?
2. To increase Kangaroo Care utilization from 41% to ≥ 75%

Kangaroo Care is associated with decreased infant mortality, hypothermia, hospital stay time, and nosocomial infection rates (Conde-Agudelo & Diaz-Rossello, 2016). However, rates in neonatal intensive care units still remain low.

KC occurrence was monitored in a total of 364 infants with a birth weight ≤ 1250 grams. Different strategies to improve incidence rates were implemented in phases.

Included interventions:
- Kangaroo care education for nurses
- Improved nurse-to-patient ratio
- Emphasis of KC in multidisciplinary rounding
- Improved documentation of KC
- Obtaining securement devices to prevent extubation or dislodgement of invasive lines
- Involvement of respiratory therapists in transferring intubated infants
- Providing KC pamphlets and one-on-one education to NICU patents.

Weekly KC occurrence was reviewed on all NICU infants with birth weight ≤ 1250 grams by the clinical nurse specialist.

A 60% increase was made in KC utilization in low birth weight infants due to the implementation of a variety of measures. These measures and the results have indicated that establishing kangaroo care as a standard of care in very low birth weight infants is obtainable. Audits will continue being collected each month on KC to verify a continued increase.