

# Wednesday Webinar: November 2019

## ***The BFUSA Onsite Assessment: Experiences and Advice from CHAMPS Hospitals***

Presented by

Lindsey Robertson, RN-BSN, CLC, Anderson Regional Medical Center

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Moderated by

Laura Burnham, MPH

Jennifer Ustianov, MS, BSN, RN, IBCLC

Press \*6 to mute your line, #6 to unmute. Please do not press hold.  
You can use the chat box for questions during the presentation.

# Upcoming CHAMPS Trainings

- **Monday, December 2<sup>nd</sup>** Breastfeeding Clinical Competencies Training
  - **Where:** St. Dominic Hospital: 969 Lakeland Drive, Jackson, MS 39216
  - **When:**
    - Morning Session: 8AM-12PM
    - Registration Link: <https://bit.ly/2OUv5Gp>
    - Afternoon Session: 1PM-5PM
    - Registration Link: <https://bit.ly/32okp6P>

Trainings are open to all CHAMPS hospitals and CHAMPS community partners. You can find more information on the trainings at [CHEERequity.org/trainings](https://CHEERequity.org/trainings)



# Upcoming Wednesday Webinars

*Webinars are held in collaboration with the Mississippi State Department of Health and are scheduled on Wednesdays from 12-1PM CST*

- **December 11<sup>th</sup>:** Inter-Professional Breastfeeding Education: The UMMC IPE
  - *Presented by Dr. Anne Merewood and UMMC Faculty*
- *Look out for information on the upcoming Spring 2020 Series!*

For log-in information or for slides and recordings of past webinars, visit: [cheerequity.org/webinars.html](https://cheerequity.org/webinars.html)

If there are topics you would like covered, please email [CHAMPSbreastfeed@gmail.com](mailto:CHAMPSbreastfeed@gmail.com) or talk to your CHAMPS hospitals coach about your ideas.





# Lindsey Robertson, RN-BSN, CLC

Anderson Regional Medical Center

Meridian, MS



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ADVANCING MATERNITY PRACTICES

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# Anderson Regional Medical Center

- Separate L&D, Post-Partum, & Nursery Units
- Level 3 NICU
- Average 1200 deliveries a year
- 10 bed L&D, 22 bed Post-Partum unit
- 2 Neonatologist, 7 OB-GYNs, 4 Midwives
- 69 RNs and 2 IBCLCs
- One affiliated prenatal clinic (40% of deliveries, Choctaw contract)

# Anderson Baby-Friendly Journey Background

<b>Awarded</b>	<b>09/11/2019 01:23 PM</b>
Designation	09/19/2018 03:13 PM
Dissemination	10/12/2017 03:15 PM
Development	11/15/2016 03:41 PM
Discovery	09/02/2016 01:56 PM

- Struggled with neonatology and staff buy-in
- Strong administrative support
- Many obstacles

# On-Site Assessment: Aug 1<sup>st</sup> & 2<sup>nd</sup>

- Prep work done-
  - All notebooks organized where everything is easy to find
  - Over prepare your rosters with plenty of extra names incase some do not answer or census is low
  - Copies of schedule and rosters for 2 surveyors and 2 runners
  - Have your 5 providers scheduled, preferably right after the opening meeting.
  - Provide a list of suggested places to eat
  - We provided bottled water and hard candy.
  - Visitor badges
- Opening round table meeting- CEO, CNO, Nurse Managers, WIC Rep, Purchasing Dept, IBCLCs, key members of core team
  - Majority of questions were directed towards myself as the team lead
  - Mainly went through yes/no questions similar to the policy check off tool and Audit tool Step 3 Activity B
  - Rolled a dice to randomly select staff for interview. They will want an even number of dayshift/nightshift. Only our day one staff were interviewed.

# On-Site Assessment: Aug 1<sup>st</sup> & 2<sup>nd</sup>

- One surveyor started physician/staff interviews, other went to prenatal clinic
  - Make sure staff knows how to demonstrate and teach hand expression
  - Make sure staff knows that they completed 5 hours of “hands-on training” as well as their online education
- Prenatal Clinic:
  - Clinic providers were interviewed and all 10 patient interviews were done in person
  - Schedule your prenatal patients in 15min increments to have a smooth consistent flow
  - One runner with each surveyor
- Post-partum and NICU interviews
  - We had 10 post-partum moms on the floor (2 had babies in the NICU)
  - 1 NICU mom was visiting her baby, so only 2 NICU moms had to be called (talk to NICU moms and find out what time they plan to visit their baby that day and write it on your schedule)
  - Next, they started making post-partum calls.
  - After all audits were completed, they asked to see any documentation they needed to back what the moms stated (proof of medical indication for supp, documented education when mothers requested supp, skin to skin interruption reason, etc.)



# On-Site Assessment: Aug 1<sup>st</sup> & 2<sup>nd</sup>

- Purchasing verification

- This is very thorough! They will want to see 3 MONTHS (not just 3 receipts) of receipts/invoices and cancelled check or bank statement linking EACH infant feeding item (nipples, bottles, every type of formula your purchase, pacifiers, etc.).

- Go through this with your purchasing agent months before to make sure they understand the entire requirements.

- We had a hiccup here, but it was resolved quickly 😊

- Ask your nightshift girls to come in early (6:00)

# On-Site Assessment: Aug 1<sup>st</sup> & 2<sup>nd</sup>

- Day 2- We got to start later (9:00ish)
- They checked all poster locations and formula storage locations
- One surveyor got to witness a vaginal delivery, skin-to-skin, and the nurse assisting the mom with her first breastfeeding
- The other surveyor sat with me and we reviewed all prenatal education, brochures, class handouts, post-partum education (have all of this organized and ready! Cover up any nipples/bottles w/ stickers)
- Rev'd all staff education logs, times, and certificates for the staff that were randomly selected for a survey
- Surveyor rev'd all policies (organized in a notebook)
- The last couple of hours, we left and the surveyors spent their time typing up their report for Baby-Friendly USA to review.
- They left around noon and told us to plan our party 😊.
- Results took right at 6 weeks (they told us 8-10).

# Next Steps

- Advertise!
- Set dates for bi-annual 1-hour skills fair to keep up with yearly competencies
- Work on increasing exclusive breastfeeding rates
- Aim for skin-to-skin in the OR
- Keep track of monthly data to make sure staff are staying the course and not slipping back into old practices



Angela Ferguson-Parker, Certified Lactation Counselor  
&  
Kim Pace, Nurse Manager



**Southwest Mississippi  
Regional Medical Center**



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Southwest Regional  
Women's Center  
*Maternity Suites*

McComb MS • [smrmcmaternity.com](http://smrmcmaternity.com)

Since our LDRP opened in 1993, Southwest has delivered more than 20,000 little miracles.

December 2019, will mark our 26<sup>th</sup> year providing single room maternity care.

Our unit features nine luxurious, multi-functional Labor, Delivery, Recovery, Post partum suites.

All phases of labor and delivery, through recovery and post partum take place in one room.



Our highly trained Perinatal staff work together as a team to provide the best care for our mother and baby couplets.





Baby-  
Friendly  
USA

SMRMC began the Baby Friendly journey in:

Discovery 01/23/2016

Development 02/09/2017

Dissemination 02/09/2018

Designation 01/23/2019

On-Site assessment dates 10/21/2019-10/22/2019



# The Assessors

## **Peggy**

- Chicago, IL
- Retired Nurse

## **Diane**

- New Jersey
- Retired Nurse

# Preparation

- Keep in contact with CHAMPS
- Do the CHAMPS Mock Assessment
- Contact Baby Friendly, if needed
- Monthly Task Force Meetings
  - Involve every department or personnel that may be involved in this Pathway, even if it's in the latter stages (ie., Purchasing Department, Accounting, etc.)

# Preparation

- Audit Tools
- Prepare your Nurses, Health Care Providers and Patients with the Interview questions
  - Do your Patient INTERVIEWS!
- Contact patients prior to the on-site for recall purposes
- You may need to remind staff of the “BIG DAY”
- Organization
- On Site Assessment Checklist
  - This document is provided to assist in preparing for the assessment

# Preparation

- Check your magazines or anything you may be receiving from any company that may be provided to your patients.
- Check patient documentation daily
  - If a pt. is interviewed and the pt. replies to a question that does not line up with the BF Guidelines, the assessors will check the charting. (e.g., Pt. stated baby was out of the room for 4 hours, pacifier was given, pumping or hand expression was not taught or offered to mom with in 6 hours.)

# The Agenda

**Southwest Mississippi Regional Medical Center**  
**Monday, October 21-22, 2019**  
 Baby Friendly Assessors: Peggy Litt, Diane Procaccini  
 Hospital Contact: 215 Marion Avenue, McComb, Ms 39648  
 601-249-1460

## Day One

Time	Place	Event
8:00 am – 8:15 am	SMRMC Main Entrance	<b>Arrival and Greeting</b>
8:15 am – 8:45 am	6 <sup>th</sup> Floor Conference Room	<b>Entrance Conference/Administrative/Multi- Disciplinary Task Force Interview</b> <ul style="list-style-type: none"> <li>○ Sr. Administrative Officer-Richard Williams</li> <li>○ Physician Leadership – Kevin Richardson, Micheal Artigues</li> <li>○ Nursing Director- LaVoyce Boggs</li> <li>○ Nursing Director Associate- Shelia Williams</li> <li>○ Nursing Manager for Maternity Services- Kim Pace</li> <li>○ Quality Improvement- Lyn Gurney</li> <li>○ Staff Training Coordinator/ Education Department-Janet Jenkins</li> <li>○ Prenatal Patient Education Coordinators/ Child Birth Education Classes- Haley Phillips Prenatal Breastfeeding Classes- Angela Parker</li> <li>○ <b>Public Relations-Tina Brumfield</b></li> <li>○ <b>Accounting/Data Analyst Provider-Mallory Ginn</b></li> <li>○ <b>WIC District Breastfeeding Coordinator- April Horn</b></li> <li>○ <b>LDRP Charge Nurse—Phaedra Deer</b></li> <li>○ <b>LDRP Nursery Nurse/CLC—April Jones</b></li> </ul>
9:00 am – 12:00 pm	5 <sup>th</sup> Floor Meeting Room & 4 <sup>th</sup> Floor Classroom	May include: <ul style="list-style-type: none"> <li>•Health Care Provider Interviews (<b>Reserved times</b>)</li> <li>-<b>Dr. Kevin Richardson OB/GYN (Non-Affiliated Clinic)@0900</b></li> <li>-<b>Dr. Stephanie Harrell, Pediatrician (Non-Affiliated Clinic)</b></li> <li>•Postpartum discharging mothers</li> <li>•Postpartum mothers and mothers with infants in special care.</li> </ul>
10:00 am 10:30 am 10:45 am	Consulting Room 1015 Delaware Avenue, Suite B	<ul style="list-style-type: none"> <li>•Prenatal Patient Interviews (Mississippi Women’s Ob/Gyn)</li> <li><b>3 appointment’s scheduled for on- site interviews @ Affiliated Clinic in this time slot</b></li> </ul>
11:00 am		<ul style="list-style-type: none"> <li>-<b>Dr. James Nobles OB/GYN (Affiliated Clinic)</b></li> <li>•Nursing Staff (day shift) interviews</li> <li>•Observing Births and/or patient education</li> <li>•Facility Observation (Ten Steps Poster’s and Banners and compliance with International Code of Marketing of Breast-milk Substitutes)</li> </ul>
12:00 pm – 12:30 pm		Lunch Break

# The Rosters

- 10 Nursing Staff (Day and Night shift)
- 5 Health Care Providers
- 10 Prenatals ( starting @ 28 weeks gestation)
- 10 Postpartum (Vaginal Deliveries)
- 5 Postpartum (Cesarean Section Deliveries)
- 5 NICU (with good outcomes)

# Special Note

- For every provider and staff nurse interviewed, the assessors will want to see PROOF of their required training.
- If you hire a nurse that has received training from another facility, you will have to obtain not only the certificates but also the Course Topics and Competency Skills List to assure all required topics are covered in the 20 hours.

# Next Steps

Task Force Meetings Bi-monthly

Working closely with affiliated prenatal clinics and WIC

Pediatric referrals to offer immediate help to d/c breastfeeding couplets

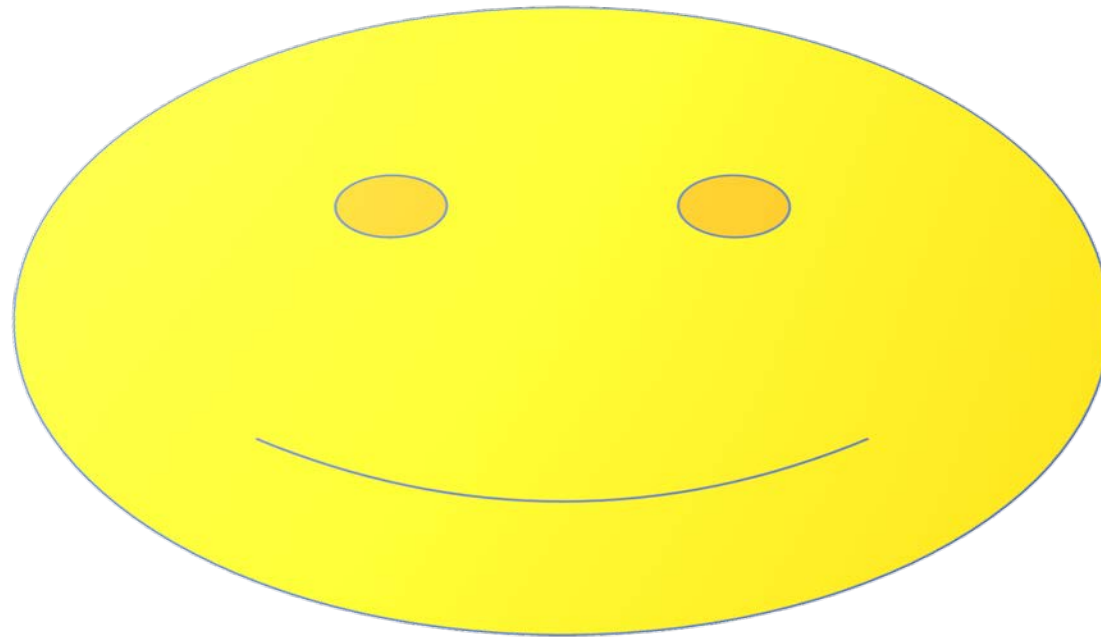
Monthly data collection

Safe Sleep Implementation

Breastfeeding support group and more community outreach to increase prenatal breastfeeding knowledge and postpartum breastfeeding duration



# THE END





Amy Cross, RN-BSN, Nurse Manager Mother Baby Unit  
Mississippi Baptist Medical Center  
Jackson, Mississippi



# Mississippi Baptist Medical Center

- 8 Labor Beds, OBED, OB Hospitalist on site
- 19 bed Postpartum unit with couplet care
- Average 180 deliveries per month
- Neonatologists that see both well babies and neonatal intensive care babies
- Lactation nurses available
- Rooming in rates at 95% on average each month

# On-Site Preparation

- Team met weekly for the three weeks leading up to survey
- Checklists were created for each area and reviewed at each meeting to see what still needed to be accomplished
- Escorts were chosen and prepped on activity outline for each day
- Staff nurses that were scheduled for the days of the evaluation were prepped and reviewed on possible questions and answers

# Survey Days

- Meeting with administration in conference room and quick review of the schedule for the survey
- Escorted surveyors to Mother-Baby unit where rooms had been designated for their use for interviews both in person and via phone
- Surveyor requested a roster of all nursing staff and informed nurse manager of mother-baby that nurses would be selected from all staff, not just who was working those two days, for interviews (This made us sweat!)
- Surveyor concerned about the number of OB's that were on the list for interview and requested a second neonatologist be brought in for interview (They like to talk with 3 OBs and 2 Pediatricians/ Neonatologist in our case)
- Many of the inpatients did not want to be interviewed and requested 24 hr discharges to help avoid the surveyors
- One surveyor did not like phone interviews
- Highly recommend having a list of twenty vaginal deliveries and ten c-sections for phone interviews
- Highly recommend organizing your education binders with all education per name using ABC tabs
- Highly recommend organizing your Financial information in categories
- Chart checks were sporadic and only to back up what the patient said or disprove what the patient said:
  - Example: A NICU mom told the surveyors via phone that she was not set up on a pump for 48 hours and the chart was reviewed to show that this was not the case

# Future Goals

- Getting the phone call that we succeeded in the Baby Friendly Survey!
- Continue educational growth opportunities for staff in newborn feeding and care, as well as postpartum care
- Increasing access to online educational opportunities for patients before, during and after delivery



online

# Questions?

Use the chat box on Webex to send in any questions you might have

Think of a question after the webinar?

Email the CHAMPS Team at [champs.breastfeed@gmail.com](mailto:champs.breastfeed@gmail.com)!

# Thank you for joining!

Tune in on December 11<sup>th</sup> for the next webinar in the series, *Inter-Professional Breastfeeding Education: The UMMC IPE*