

# Wednesday Webinar

## *Hospital Experiences: Preparing for a Baby-Friendly USA Assessment*

May 10<sup>th</sup>, 2017

11:00am-12:00pm (central time)

**Kathy Parkes, MSN-Ed, BSPsy, RN, IBCLC, FILCA**  
CHRISTUS Santa Rosa Hospital – New Braunfels

**Antoinette Kleiner, RN, MSN, IBCLC**  
Northern Navajo Medical Center

Remember to mute your line by pressing \*6. Please do not press hold.

# Upcoming 4-hour Clinical Skills Trainings

Open to all CHAMPS hospitals!

- June 22<sup>nd</sup> and 23<sup>rd</sup> at Methodist Olive Branch in Olive Branch, MS

<http://www.champsbreastfeed.org/events.html>





# Kathy Parkes, MSN-Ed, BSPsy, RN, IBCLC, FILCA

Christus Santa Rosa Hospital – New Braunfels

New Braunfels, TX



# Christus Santa Rosa Hospital - New Braunfels

- Located 30 miles north of San Antonio, TX
- Built in 1953
- Acquired by CHRISTUS in 2008
- 7 LDRs, 9 private postpartum rooms
- 2 FTEs for IBCLCs
  - Dropped to 1 FTE for RN, IBCLC in 2015
- Level II NICU with 6 beds
- Birthrate of 850-900 per year

# Christus Santa Rosa Hospital - New Braunfels

- Began Baby-Friendly work in 2005
  - Started with keeping time in nursery to a minimum
  - Closed Newborn nursery in 2010
  - Development November 2012
  - Dissemination September 2013
  - Designation October 2014
  - BFHI designation September 2016
- Surveys
  - November 2015 1<sup>st</sup> BFHI Site Assessment
  - August 2016 Final BFHI Site Assessment

# Christus Santa Rosa Hospital - New Braunfels

- Breastfeeding stats
  - 2009
    - 88.5% any breastfeeding
    - 79% exclusive breastfeeding at discharge
    - 0% safe skin-to-skin care after birth
  - 2017
    - 100% any breastfeeding
    - 93.5% exclusive breastfeeding at discharge
    - 83.8% safe skin-to-skin care after birth

# Christus Santa Rosa Hospital - New Braunfels

- Funding
  - 2013 = 1<sup>st</sup> annual Harleys and Habits
    - Approx. \$25,000.00
  - 2014 = 2<sup>nd</sup> annual Harley and Habits
    - \$29,614.00
- Helpful Hints
  - Keep funding earmarked
  - Get community involvement

# Christus Santa Rosa Hospital - New Braunfels

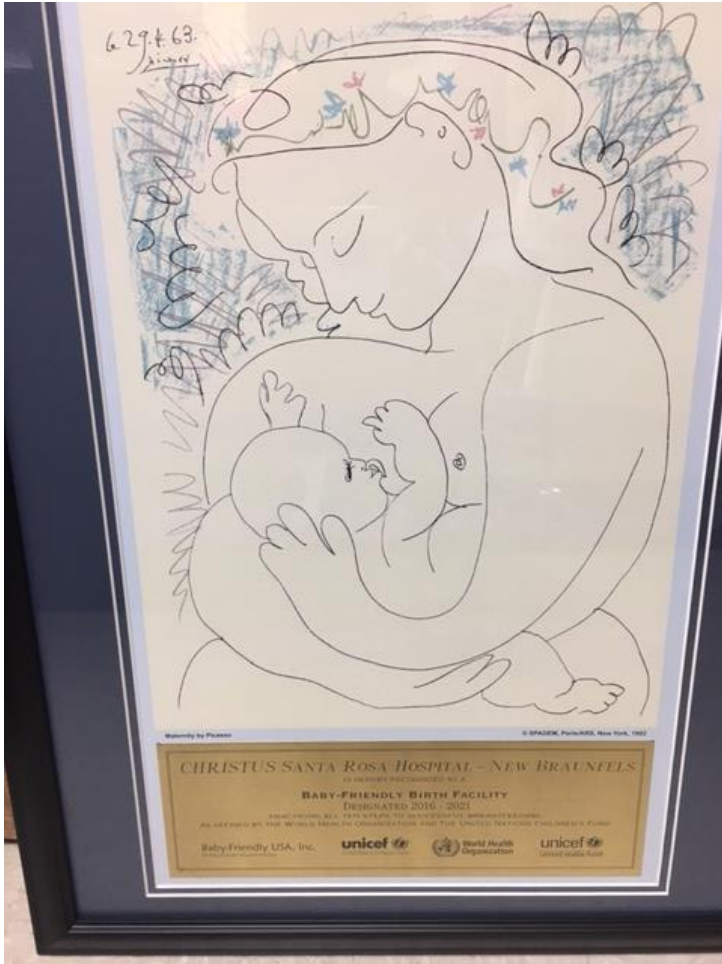
**FINALLY!!!!**

CHRISTUS Santa Rosa-New Braunfels is the **18<sup>th</sup>** hospital in Texas to become BFHI designated, and the **1<sup>st</sup>** in central to south Texas.





# Christus Santa Rosa Hospital - New Braunfels



2 CHAMPS Mock surveys  
VERY helpful in pointing out  
small things that needed to  
be changed as well as  
validating to all staff the  
importance of the BFHI  
process.

Physician resistance!

# Baby-Friendly USA Assessment

- Have one very knowledgeable staff for each assessor
- Patient teaching in all formats for adult learning
- Provide cheat sheets for staff, physicians, administrators
- Have everything well organized
- Have rooms set aside
- Have more than the recommended number of patient contacts to be made, at least double
- Plan to take the next day off for self-care!!

# Next Steps

- Annual QI projects
- Take the NICU to Baby-Friendly
- Continue staff education and hands-on practice
- Assist other San Antonio CHRISTUS campuses in their Baby-Friendly pathway work

**There is no “resting on your laurels”!**

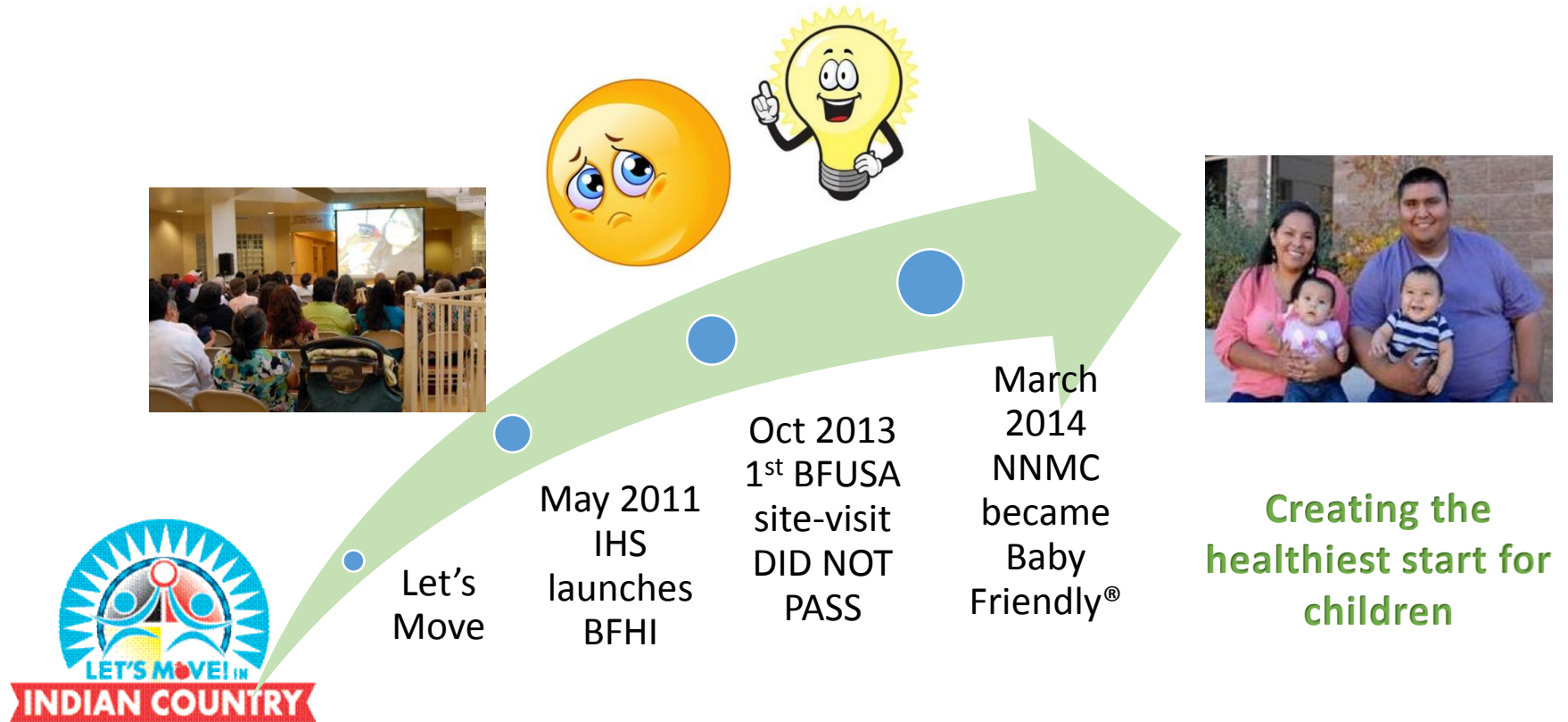


# Hospital Experiences: Preparing for a Baby-Friendly USA Assessment

Antoinette Kleiner, RN, MSN, IBCLC-Indian Health Services, Shiprock, NM

May 10, 2017

# Background-



# Lessons learned-

- Teach & walk the talk
- Same message, multiple formats
- Use the same words as Baby-Friendly®
- Remember the “why’s”
- Remember outside clinics
- Ensure accurate documentation



*“We promote rooming-in so that you can feed baby on cue and learn to recognize and respond to baby’s needs”*

# Lessons learned-

- Patient interviews
  - Enough patients
  - Get permission
  - Rosters at the ready
  - Frequent phone contacts
  - Have a party prn!
- Chart reviews
  - Check access & content
  - Designate staff to assist assessors



# Lessons learned-

- Staff interviews-

- Creative staffing prn

- Prepare staff

- Train everybody that does this care

- Ensure hand expression done right!

**Baby Friendly Countdown to Survey**  
 3 weeks until our On-Site Assessment: March 24-25, 2014  
**Milk Expression**

If moms are separated from their baby, our policy states that we should be helping them express breastmilk **within 6 hours of birth.**

- Studies show that the closer to the birth the mother is able to express, the more milk she gets initially and long term.
- A combination of hand expression and electric pumping is optimal for establishing a good supply.
- Mothers are often able to express more milk by hand than the pump in the early days.
- A minimum of 8 milk expressions in 24 hours is optimal, mimicking a baby's typical feeding pattern.

**What to say if the mother tells you she is only getting small drops and asks, "is it worth saving?":**

- Tiny drops of your milk are like medicine for your baby.
- If we collect the drops of your milk for your baby in a syringe, the nurses will be able to use it for mouth care for him even if he is not eating yet.
- This introduces your baby to the taste of milk, and the protective qualities in your milk begin to help him because they are absorbed through the mucus membrane in his mouth.
- Just a few drops of breastmilk have an important effect on a tiny baby.

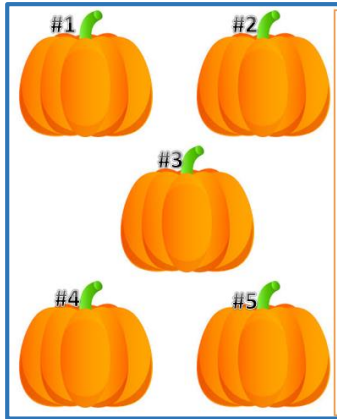
**What if she tells you she is too tired to pump around the clock for her baby:**

- Acknowledge her feelings of how difficult it is to remember to pump around the clock when she is tired.
- Ask her if she would like you to remind her when it is time to express, if she would like to take a nap.
- Have they started feeding her baby yet? If so she can see some of the milk expressions with feeding the baby in the Neonatal Stabilization/Observation Unit or NICU.
- Let her know that this time after the baby is born is a "window" of opportunity for taking advantage of the her body after the birth. She will be telling her body lots of milk by expressing her milk often.
- Encourage her to incorporate some visitor free rest time the day, so that she does not get exhausted with too much activity.



**The 10 Steps to Baby Friendly**

1. Maintain a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within one hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
6. Give infants no food or drink other than breastmilk, unless medically indicated.
7. Practice "rooming-in"-allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand (cue-based).
9. Give no pacifiers or artificial nipples to breastfeeding infants.



**Match the topics to the correct**

- BFHI Packet Pumpkin!**
- Breastfeeding laws/returning to work or school
  - Importance of Rooming-In
  - Exclusive breastfeeding for 6 months
  - Pain relief in labor
  - Hunger cues & Feeding on demand
  - Breastfeeding positions & Latch-on
  - When to start solid foods
  - Importance of proper position & latch-on
  - Hand expression
  - Importance of early and frequent breastfeeding
  - Importance of Skin-to-Skin
  - Review of Skin-to-Skin & Rooming-in
  - Risks of formula
  - Benefits of breastfeeding

NAME: \_\_\_\_\_

**BFHI® Staff/Providers Survey Study Sheet**

- ✓ **ALL** women should receive information about the benefits of breastfeeding so that **THEY** can make a **FULLY INFORMED CHOICE**
- ✓ **ALL** pregnant women should receive information about how to manage breastfeeding to **PREPARE THEM TO BREASTFEED**
- ✓ How much Baby-Friendly® training did you receive?
  - ✓ All Staff are trained on the Baby-Friendly Hospital Initiative Policy
  - ✓ Nursing staff are also given 15 hours BFHI course in Health Stream & 5 hours Breastfeeding Skills Fairs
  - ✓ Medical staff are also given 3 hours BFHI course on Lactation Education Resources
- ✓ Breastfeeding benefits for babies include:
  - Fewer ear infections, fewer stomach infections, fewer respiratory infections, reduced risk for obesity, reduced risk for Type 1 & Type 2 diabetes, reduced risk for some childhood leukemia
- ✓ Benefits of breastfeeding for moms include:
  - Reduced risk for obesity, reduced risk for diabetes, reduced risk for breast and ovarian cancers, increased bonding with baby
- ✓ Breastfeeding also increases bonding between mom/baby & saves money on formula, illness & disease
- ✓ Skin-to-Skin is important because:
  - It regulates the temperature of mother and baby, it regulates the infant's heartbeat and breathing, it regulates infant blood glucose levels and prevents hypoglycemia, helps early initiation of breastfeeding, calms both mother and baby, and promotes positive mother-infant bonding



# Lessons learned-

Northern Navajo Medical Center, Shiprock, NM Baby Friendly Assessment Schedule

March 24<sup>th</sup> & 25<sup>th</sup>, 2014

- Have your people ready
  - Brief beforehand
  - Show of support at start
  - Be mindful of their schedules
- Have your binder ready
  - Clear layout
  - Formula receipts
- Make adjustments for Day 2
  - More patients
  - More staff

Day 1	Task	Attendees	Location
07:55am	Welcome BFUSA Assessors	Antoinette Kleiner, RN/IBCLC Angelina Smith, RN/PHN	West Wing main entrance (reserved parking spaces)
08:00am- 08:30am	Introductions and entrance conference	Executive Management staff Baby Friendly task force members	Nizhoni A conference room
08:30am- 09:15am	Administrative Interviews	HEC members Cassandra Shorty, SCN-OB Carlene Tahe-Begay, SCN-MCH Lenora Tso, SCN-TPC/Amb. Care	Nizhoni A conference room
0915-0930	Purchasing Agent Interview Review of Formula FMV	Yvonne Jumbo (or delegate)	Main Conference Room
0930-1000	Tour	Antoinette Kleiner, RN/IBCLC Angelina Smith, RN/PHN OB ward: Cassandra Shorty, SCN and staff	OB Ward
10:00am- 12:00pm	OB ward Patient interviews Staff & Provider interviews	Current In-patients Providers & Staff on duty	OB Clinical Coach office OB workroom-anteroom
	Postpartum Moms Interviews	Postpartum moms Antoinette & Angelina Madeline Powers/BFTF members	Tse Bit Ai A & B "Mommy Green Room"= Nizhoni A
12:00 – 1:00pm	Lunch/Review of Training <u>Curriculum/Policy</u>	Antoinette Kleiner, RN/IBCLC Angelina Smith, RN/PHN	Tse Bit A & B
	Survey Moms' Luncheon	Madeline Powers/BFTF members	Nizhoni A

# Questions?

- Upcoming webinars

- June 21<sup>st</sup>: “CHAMPS: What Happens Next?” – Dr. Anne Merewood



- Thanks for joining today!

- These slides and a recording of the webinar will be uploaded to our website this afternoon.

[CHAMPSbreastfeed.org/webinars](https://CHAMPSbreastfeed.org/webinars)