Implementing Evidence Based Maternity Care In Hospitals

Julia Shafer, MSN, CLC
Director Women’s Services
St. Mary’s Healthcare
Amsterdam, New York
January 23, 2014
St. Mary's Healthcare- Amsterdam

- 35 miles west of Albany
- 150 bed upstate community healthcare system
- 500 Births per year
- Level I Nursery
- 65% Medicaid
- 19% Hispanic
- 1% Amish
St. Mary’s Story

• Breastfeeding initiation & exclusivity rates low
• Supplementation rates high
2008 Breastfeeding Statistics

Source: Healthy People 2010
New York State Department of Health Perinatal Data Report.(2009).
Improvement Journey

• Breastfeeding Quality Improvement in Hospitals Learning Collaborative Participant 18 months ending February 2012
Leading change at St. Mary’s

Kotter’s model for organizational change
**John Kotter, Leading Change**

<table>
<thead>
<tr>
<th>Reasons Why Attempts at Change Fail</th>
<th>Leadership’s Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not establishing a great enough sense of urgency</td>
<td>Establish sense of urgency</td>
</tr>
<tr>
<td>Not creating a powerful enough guiding coalition</td>
<td>Create guiding coalition</td>
</tr>
<tr>
<td>Lacking a clear vision</td>
<td>Develop vision and strategy</td>
</tr>
<tr>
<td>Under-communicating the vision by a factor of ten</td>
<td>Communicate vision</td>
</tr>
<tr>
<td>Not removing obstacles to the new vision</td>
<td>Empower broad based action</td>
</tr>
<tr>
<td>Not systematically planning for and creating short-term wins</td>
<td>Generate short term wins</td>
</tr>
<tr>
<td>Declaring victory too soon</td>
<td>Consolidate gains and produce more change</td>
</tr>
<tr>
<td>Not anchoring changes in the corporate culture</td>
<td>Anchor new approaches in the culture</td>
</tr>
</tbody>
</table>
Leadership Tasks

• Worthwhile Vision
• Sense of urgency
• Support
• Communicate
Vision Setting

• To best serve our community
• Promote health
• Eliminate disparities

• Breastfeeding a public health priority
• In solidarity with the vulnerable discern & overcome barriers
• Let our practices be evidence based and not be a barrier
Urgency

• Quality Measures demonstrate that we are falling short

• When this many patients are supplementing or choosing not to breast feed it’s a signal that we need to change
St. Mary’s Breastfeeding Improvement Council
D. Percentage of infants fed both breast milk AND formula

Goal = 18.00
NYSDOH performance

• The truth about where we are compared to the desired
• That the desired is achievable
Public Health Law 2505-a
Mother’s bill of rights, requires each hospital to publicly report & provide the following information about its childbirth practices and procedures.

Data shown are for 2011.

<table>
<thead>
<tr>
<th>Feeding method</th>
<th>This facility</th>
<th>Statewide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fed any breastmilk</td>
<td>64.5 %</td>
<td>82.7 %</td>
</tr>
<tr>
<td>Fed exclusively breastmilk</td>
<td>50.4 %</td>
<td>39.7 %</td>
</tr>
<tr>
<td>BF infants supplemented with formula</td>
<td>21.9 %</td>
<td>51.9 %</td>
</tr>
</tbody>
</table>

1Based on live born infants, excluding infants who were admitted to the Neonatal Intensive Care Unit or transferred to or from another hospital.
2Percentage is based only on infants who were fed any breast milk.
Breastfeeding Improvement Council - Guiding Coalition

- Team meets regularly to build cohesion
- Responsible for clear articulation of vision
St. Mary’s Breastfeeding Improvement Council

- Emily Etzkorn MD Pediatrics, Board Member, Quality Executive Team
- Debbie Lees, RN, CLC- Clinical Champion
- Cindy Pikcilingis, RNC, IBCLC-Lactation Specialist
- Parul Saxena, MD, CLC - Lead Clinician, Medical Director Nursery and Pediatrics
- Lisa Summerfield RN CLC- day to day leader
- Julia Shafer- MSN, CLC Team leader Senior Leader

Contact Information: shaferju@smha.org  
518-841-3862
Council expanded

• Stacey Arminio RNC, BSN, CLC
• Christine Fiore Peer Counselor WIC
• Margaret Spiak Pediatric Nurse Manager
• Maternal Child Health Department
• Pediatric Task Force- standing agenda item
• Maria Loux- Mother
• Ad hoc members across the system

Journey to Baby Friendly
AIM

• Increase breastfeeding initiation & exclusivity rates to 75% or greater by February 2015
Change Concepts St. Mary’s

By February 2012, the following evidence based practices will be \textit{usual practices} at The Birthplace of St. Mary’s Hospital:

- 100\% of health professionals will have eight hours of annual lactation support education (achieved)
- 90\% of mothers will initiate breastfeeding\& skin to skin within one hour of vaginal birth, 75\% within two hours of C-\textit{sect} (achieved)
- 90\% of infants will room-in with mothers $\geq 18$ hours/day (achieved $> 95\%$)

Data sets

• What get’s measured get’s improved
• NYSDOH BQIH data measurement plan
• Joint Commission- Implementing the perinatal core measure on exclusive breast milk feeding, 2nd edition (2013)
Staff education

St. Mary’s Breastfeeding Improvement Council
O. Percentage of staff assigned to direct mother/infant care receiving training on breastfeeding and lactation support

goal = 90.00

Ongoing encouragement
Infants fed breastmilk within 1 hour vaginal delivery

Targeted education
Infants fed 8 or more times every 24 hours
Education

• Pre-assessment Survey
  • Current perceptions & practice vs. evidence

• Formal training:
  • *Ten Steps to Successful Breastfeeding*

• Ongoing Efforts:
  • Annual RN reviews include a minimum of 8 hours of breastfeeding focused continuing education
Research Shows

• Extensive mother infant skin-to-skin contact lasting more than 20 minutes after delivery increases the duration of exclusive breastfeeding.

Survey says... 83%

- I encourage sustained skin-to-skin contact after delivery?
Communicate the Vision

- Education #1
- Bulletin Boards
- Newsletters
- Celebrations
- Radio
- Data review
- Discussions
Every Council Member

- Charged with providing positive support to colleagues reducing chaos
- Empowered to influence
- Empowered to test
- Provide & encourage feedback
- Sounding Board
- Practice messages
- Develop tools & ask for clinicians feedback
Tools Created

Rooming-in
Get to know your baby and let your baby know you

For a great start, nurse your baby in the first hour of life and plan on rooming in.

Babies who room-in and are skin-to-skin get to:
- Smell you
- Hear you
- Feel you
- Nurse from you
- Stay Warm
- Be calmed and loved by you

DAILY FEEDING LOG FOR PARENTS

Please help us take care of your baby by writing down any feedings and/or diaper changes that you change while your baby is in the room with you.

Watch for some early feeding cues like:
- Moving hands toward mouth when sleeping
- Sucking on tongue or lips
- Turning head from side to side
- Fussing or whimpering when sleeping

<table>
<thead>
<tr>
<th>FEEDINGS</th>
<th>DIAPER CHANGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>START TIME</td>
<td>URINE</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Expect your baby to want to feed 8-10 times a day, without any specific time pattern.
Celebrate every success
mPINC Survey

2007 Quality Practice Measures
Summary Information

Your Facility’s Composite Quality Practice Score:

72

What is the mPINC Survey?
The Maternity Practices in Infant Nutrition and Care (mPINC) Survey is a national survey of infant feeding practices in facilities that provide maternity care services.
The Battelle Centers for Public Health Research and Evaluation conducted this survey for the Centers for Disease Control and Prevention (CDC) between August and December 2007.

Composite Quality Practice Score Percentiles

| National | 74 |
| State   | 68 |
| Comparable Size | 77 |

National = Among all facilities nationwide
State = Among all facilities in your state
Comparable Size = Among US facilities of similar size

St. Marys Hospital reported 551 births in the past year; this facility is in the size category of 500-999 births per year.

2011 Quality Practice Measures
Summary Information

St. Marys Hospital’s Composite Quality Practice Score:

96

What is the mPINC Survey?
The Maternity Practices in Infant Nutrition and Care (mPINC) Survey is a national survey of infant feeding practices in facilities that provide maternity care services.
The Battelle Centers for Public Health Research and Evaluation has conducted this survey for the Centers for Disease Control and Prevention every other year since 2007.

St. Marys Hospital’s Composite Quality Practice Score Percentiles

<table>
<thead>
<tr>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentile</td>
</tr>
<tr>
<td>96</td>
</tr>
</tbody>
</table>

New York

<table>
<thead>
<tr>
<th>Percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td>99</td>
</tr>
</tbody>
</table>

Similar Size Facilities

<table>
<thead>
<tr>
<th>Percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td>98</td>
</tr>
</tbody>
</table>

St. Marys Hospital reported 435 births in the past year; it is in the size category of 150-499 births per year.
St. Mary’s Breastfeeding Statistics

Gains of 20-30% over four years
Empower broad based action

• Include staff
• Provide “way in” opportunities
• Make changes based on feedback
• Encourage testing
• Ask about challenges & solution ideas
Selected Change - Rooming In

- Major high leverage change
- Potential for failure due to staff resistance – high
- Mother Baby Task force created
- Successfully changed our care delivery model
Mother Baby Care Professional Standards & Guidelines

• Task force
• Framework & Rationale
• Rules i.e. Safety First
• Subcommittee
• Day Shift
• Eve Shift
• Night Shift
Success
Mother baby care implementation and transition to Rooming in

Testing changes
Mother baby task force
Implementation goal
Rooming-in above collaborative goal for 16 months starting December 2010

St. Mary's Breastfeeding Improvement Council
K. Percentage of breastfeeding infants rooming-in >18 in 24 hours

Healthy women. Healthy families.
Generate short term wins

• Be positive
• Use data to motivate
• Celebrate
• Publish success
• Take pictures
• Share stories
Infants fed breastmilk within 1 hour vaginal delivery

![Chart showing percentage of infants fed breast milk within 1 hour of vaginal delivery. The target is 90.00%.](image)
Wins

- Build trust
- Is this medication safe to use while breastfeeding?
Pride in our work

• “Share openly and steal shamelessly”

I’m Learning to Breastfeed!

Take me to my MOM when I am Hungry!
Consolidate gains

• Continually assess
• Monitor data measures
• Use wins to generate momentum to continue on the journey
• “We are about continuous improvement for our community”
Breastfeeding Statistics

Gains of 20-30% over four years
Anchor changes

- Policy change
- Congruent orientation plans
- Congruent documentation
- Celebrate... the new is superior to the old
New York State Model Hospital
Breastfeeding Policy

• 28 required components
• 47 recommended
• Systematically changing practices to adopt the 47 recommendations
• Comprehensive
• Recommendations congruent with expert groups
• Baby Friendly, ABM, & United States Breastfeeding Committee
St. Mary’s Healthcare
exclusive breastfeeding rates

2009 to 2013 Exclusive Breastfeeding Results

Source: Statewide perinatal data system
Next Steps at St. Mary’s

- Journey to Baby Friendly
- Currently in the development phase
- Spreading to offices
- Continual improvement of maternity care practices
- Systematically changing practices to adopt all 47 recommendations
- Great Beginnings NY Participant
Implementing TJC Core Measure on Exclusive Breast Milk Feeding

Evidence shows that primary care based educational programs on breastfeeding had the greatest effect of any single intervention on breastfeeding initiation and short-term duration.

Prenatal Education

- Open ended questions to explore mother’s perceptions & concerns
- Affirm
- Targeted education
SHOW ME!

DVD: “Show Me Video Vignettes”

“Counseling About Milk Production”
Open-Ended Questions

• WHAT
  • What has your mother told you about breastfeeding?
  • What have you heard about breastfeeding?

• HOW
  • How do you feel about breastfeeding?
  • How is breastfeeding going?

• TELL ME
  • Tell me why you feel you will need formula.
  • Tell me about a typical day at your house.
Skin to Skin

- Extending minimal time frame to three hours
- Management post C-section
Team Time

- Who would be ideal Committee members to include at your agency/ facility?
- What baseline data will we gather?
- Review NYSDOH Model policy & implementation guide
- Review NYSDOH BQIH data measurement plan
Team Time

• Review Breastfeeding quality improvement change package
• Individually prioritize changes, select (3)
• As a team choose 2-3 changes you will implement

• Complete action planning worksheet
• Complete one PDSA worksheet for one element of the proposed change