IMPROVING THE EFFECTIVENESS OF A BREASTFEEDING ALGORITHM IN A BABY-FRIENDLY HOSPITAL: A QUALITY IMPROVEMENT INITIATIVE

Diane Bibb, MSN, RN, IBCLC
University of Missouri – Columbia Sinclair School of Nursing

INTRODUCTION
- Breastfeeding leads to significantly improved maternal and infant health outcomes across socioeconomic boundaries (AAP, 2012)
- A significant number of lives and health dollars could be saved in the U.S. with improved breastfeeding rates (Bartick & Reinhold, 2010; Bartick et al., 2013)
- 79% of births in the U.S. do not occur in hospitals with recommended practices (Baby-Friendly USA, 2017)
- Mothers experiencing at least six of the Ten Steps To Successful Breastfeeding were almost three times more likely to meet their exclusive breastfeeding intention (p < .0001) (Perrine, Scanlon, Li, Odom, & Grummer-Strawn, 2012)

GOALS
- Development of the Breastfeeding Algorithm
  - Followed hospital breastfeeding policy
  - Baby-Friendly guidelines and criteria
  - Utilized American Academy of Pediatrics recommendations

PICOT STATEMENT
In a Baby-Friendly hospital (P), how does modification of the current EMR (I) affect utilization and documentation of a breastfeeding algorithm during the postpartum hospital stay (O) over a four month timeframe (T)?

OBJECTIVES
1. 25% increase in correct utilization of the breastfeeding algorithm as demonstrated by nursing documentation
2. 90% of nursing staff will attend education on use of the modified EMR

ACKNOWLEDGEMENTS
The project director would like to thank Dr. Jan Sherman (Committee Chair), Dr. Urmeta Jefferson and Dr. Bryson McHardy (Committee Members) and the Hannibal Regional Women’s Care nurses for their support and assistance with this project. Contact: dbb344@mail.missouri.edu http://nursing.missouri.edu/index.php

METHODS
Setting: Obstetric unit in a Baby-Friendly designated Northeast Missouri community hospital
Population: Breastfeeding mother/baby dyads delivering at this facility

RESULTS
Documentation Related to Maternal Education
- Hand Expression: Statistically and clinically significant increase in documentation, χ² (2) = 49.9, p = .000, Φ = .5
- Feeding Cue Education: Statistically and clinically significant increase in documentation, χ² (2) = 75, p = .000, Φ = .6
- Delay in Pacifier & Bottle: Statistically and clinically significant increase in documentation, χ² (2) = 194, p = .000, Φ = .9
- Breastfeeding Log: Statistically and clinically significant increase in documentation, χ² (2) = 21.8, p = .000, Φ = .3
- Warmline: Documentation present in 100% of baseline and follow-up charts
- Support Group: Documentation present in 100% of baseline and follow-up charts

REFERENCES