

WELCOME TO THE NEW YORK STATE MODEL HOSPITAL BREASTFEEDING POLICY TRAINING

- This call is operator assisted and at this time you are in the listen only mode.
- Utilize the Chat Box to the right of your screen for any questions
 - Please chat to all participants
- There will be a Question and Answer period and at that time, the operator will un-mute your individual line.
- After the Web-Exes are complete, a summary list of the Questions and Answers will be provided to all participants.





NEW YORK STATE MODEL HOSPITAL BREASTFEEDING POLICY TRAINING

Barbara A. Dennison, MD

Bethany Hawke, MPH

Stephanie Hisgen, RN, MPH

NYS Department of Health

AGENDA



Agenda Item	Presenter
Welcome and Introductions	Stephanie Hisgen, RN, MPH
Breastfeeding: The Importance and The Benefits	Barbara A. Dennison, MD
Hospital Breastfeeding Culture	Barbara A. Dennison, MD
Hospital Breastfeeding Policy Review	Bethany Hawke, MPH
Hospital Showcase	Stephanie Hisgen, RN, MPH
Next Steps	Barbara A. Dennison, MD
Questions and Answers	Barbara A. Dennison, MD Bethany Hawke, MPH



“All babies deserve the natural protections of breastfeeding. It's the best way to ensure the proper nutrition and bonding for women who are able to breastfeed.”

Nirav R. Shah, MD, MPH
New York State
Commissioner of Health



BREASTFEEDING GETTING INCREASED ATTENTION

- Michelle Obama's *Let's Move* childhood obesity prevention program
 - Healthy eating begins with breastfeeding
 - Health Care Reform Bill (Affordable Care Act)
 - Employers must provide women time/place to express milk
 - Insurance must cover breastfeeding education & support
 - JCAHO:
 - Perinatal Care Core Measure on Exclusive Breast Milk Feeding
 - Former NYS Health Commissioner Richard Daines
 - Call to Action to Promote Breastfeeding (August 2009)
 - Surgeon General Regina Benjamin
 - Call to Action to Support Breastfeeding (January 2011)
- 

BENEFITS OF BREASTFEEDING

- Provides *Perfect Food*
- Promotes maternal bonding with infant
- Saves money
 - Reduces infant healthcare costs
 - Decreases Employee Absenteeism
 - Lowers cost of infant feeding
- Environmentally-friendly
 - Less Waste

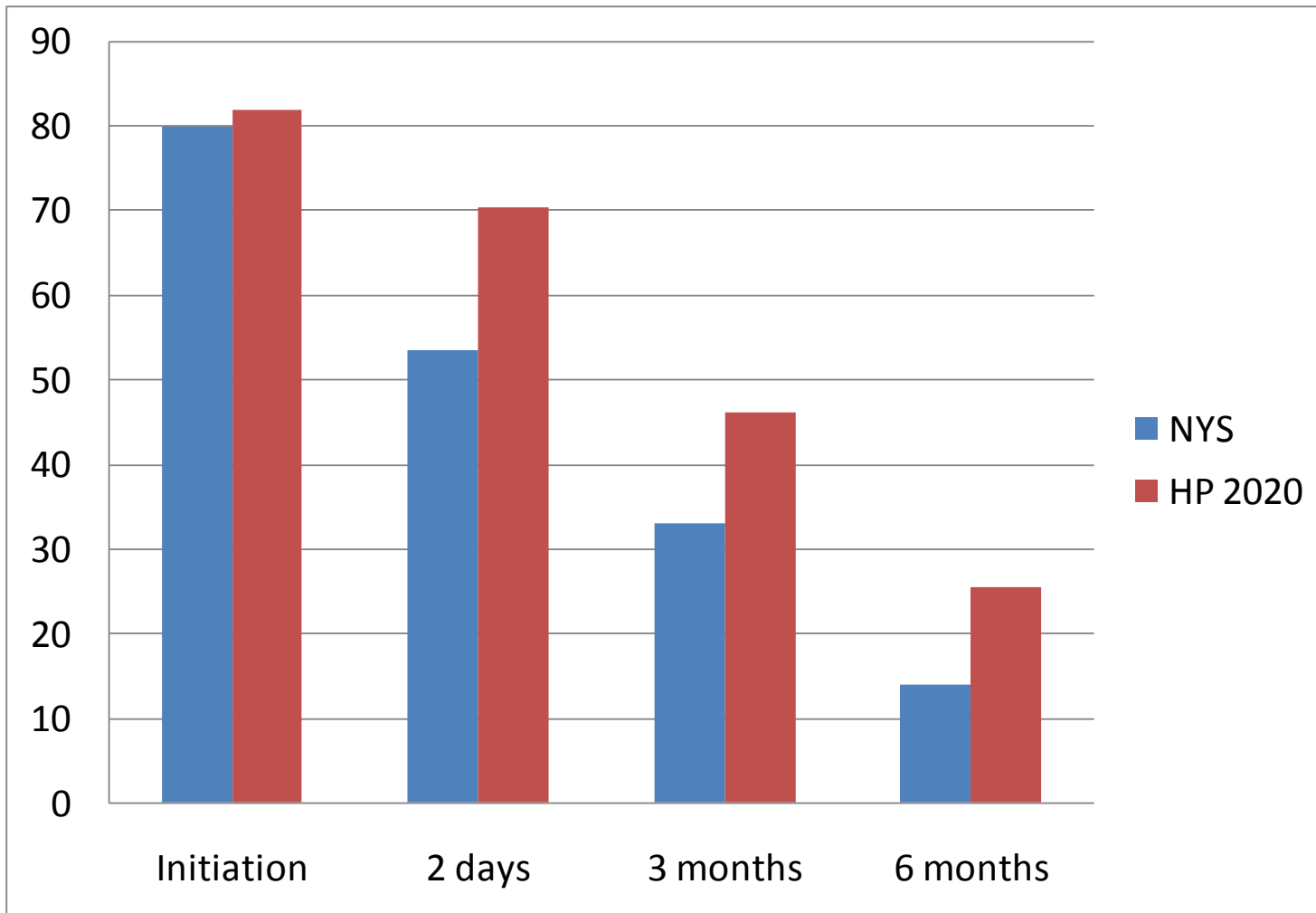


BENEFITS OF BREASTFEEDING

- Improves health of infant and mother
 - Infant:
 - Reduces infections, otitis media, diarrhea, SIDS, and certain cancers
 - Lowers risk of asthma, obesity and diabetes
 - Mother:
 - Reduces risk of breast & ovarian cancers and diabetes
 - Reduces perinatal bleeding & anemia
 - Facilitates postpartum weight loss



EXCLUSIVE BREASTFEEDING



HOSPITALS PLAY A KEY ROLE




- Hospital Maternity Practices - Ten Steps
 - Recognized as Best Practices
 - Supported by a strong, consistent evidence-base - AHRQ
 - Endorsed by WHO, CDC, AAP, ACOG, JCAHO
 - Included in NY's Hospital Rules and Regulations and Public Health Law (Breastfeeding Mother's Bill of Rights)
- Translate Policy to Practice - Implementation
- Change the Culture - *Breastfeeding Friendly*



PARTICIPANT QUESTION

In your opinion, which of the following statements **best describes** the culture of breastfeeding at your hospital?

- a. Breastfeeding **has been and will continue to be a top priority at my hospital, supported by hospital systems and staff at all levels.**
 - b. Breastfeeding **has recently become a priority at my hospital and changes to improve breastfeeding support are currently being initiated.**
 - c. Breastfeeding **is not considered to be very important at my hospital. There are few staff that are concerned with breastfeeding or systems in place to support breastfeeding mothers.**
 - d. Breastfeeding **is not at all a priority at my hospital.**
- 

HOSPITAL CULTURE – BREASTFEEDING FRIENDLY (OR NOT)

○ Golden Hour

- Mother-infant skin-to-skin time
- Initial nursing/breastfeeding

○ Promote breast milk production

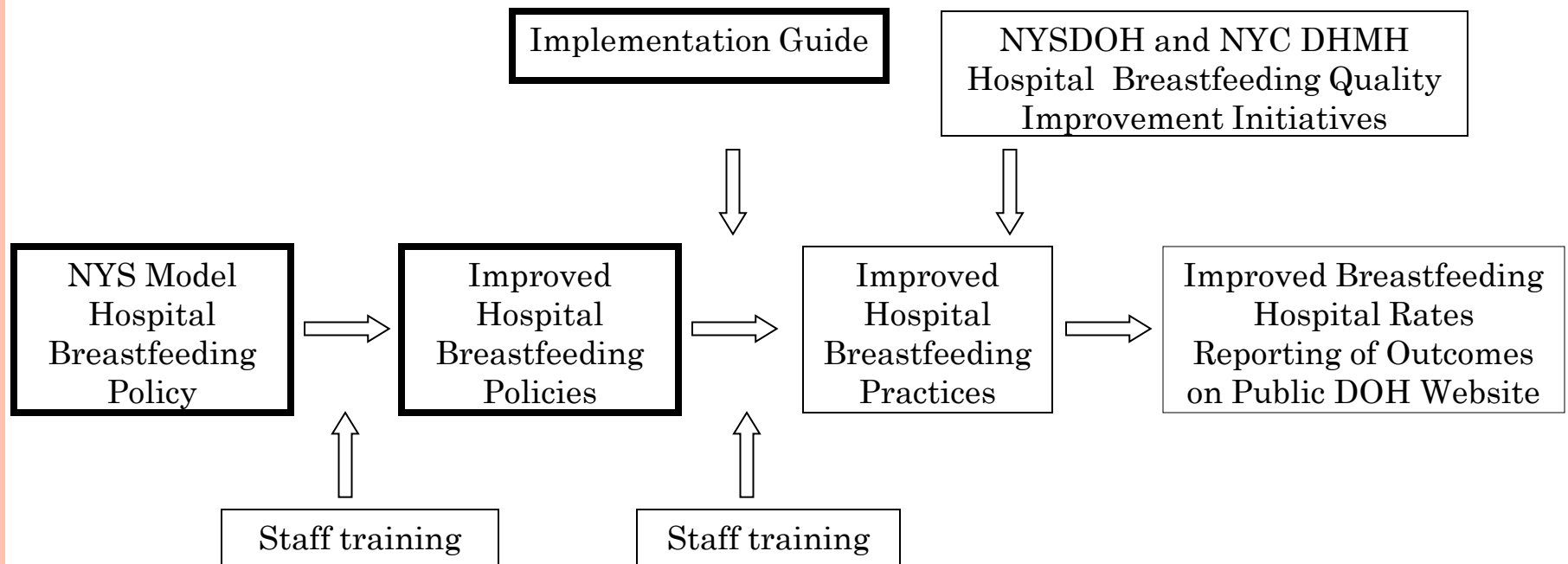
- Frequent nursing (8-12 times per day)
- Feeding infant in response to early cues
- 24-hour rooming-in

○ Breast feed breastfed infants

- Limit formula supplementation to medical necessity
- Ban discharge bags, free formula and marketing materials



NEW YORK STATE STRATEGIC PLAN FOR IMPROVING BREASTFEEDING RATES



PARTICIPANT QUESTION

Which of the following are the **required** components of your hospital's written breastfeeding policy?

- a. Breastfeeding Mother's Bill of Rights
- b. NY Perinatal Codes, Rules and Regulations, Title 10-405.21
- c. Both a and b
- d. Neither a or b
- e. Do not know



COMPONENTS OF MODEL POLICY

- Required components are consistent with
 - NYCRR, Title 10, 405.21
 - NY Public Health Law § 2505-a (Breastfeeding Mothers Bill of Rights)
- Recommended components
 - Academy of Breastfeeding Medicine protocols
 - Baby Friendly USA, Inc.
 - The Baby-Friendly Hospital Initiative
 - United States Breastfeeding Committee



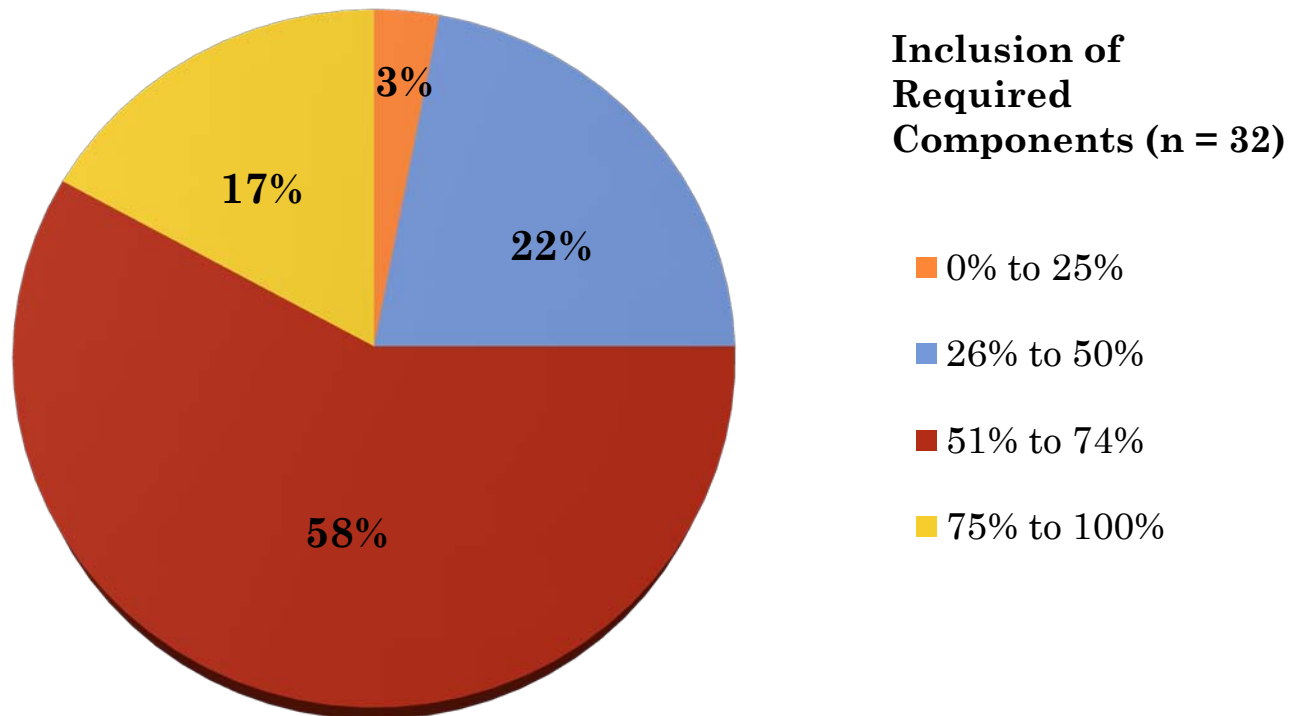
PARTICIPANT QUESTION

What percentage of the required components are currently included in your hospital's written breastfeeding policy?

- a. Our hospital has **all or almost all** (at least 75%) of the required components
- b. Our hospital has **a majority** (between 50% and 74%) of the required components
- c. Our hospital has a **some** (between 25% and 49%) of the required components
- d. Our hospital has **only a few** (less than 25%) of the required components
- e. I don't know if our hospital has a breastfeeding policy



BASELINE REVIEW OF BREASTFEEDING POLICIES FROM NEW YORK STATE HOSPITALS (SUMMER 2009, N=139 HOSPITALS)



No hospital policy included all 32 required components!

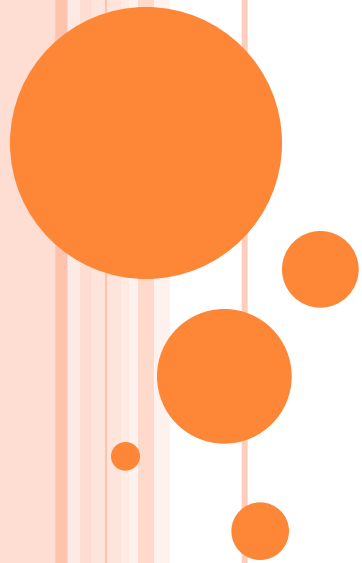


KEY DETERMINANTS OF BREASTFEEDING SUCCESS

- In the first hour of life:
 - Mother-infant skin-to-skin contact
 - Initiating Breastfeeding
- Throughout the hospital stay:
 - 24-hour rooming-in
 - Feeding on demand
 - Limiting formula supplementation
- At hospital discharge:
 - Offering discharge support
 - NOT distributing formula discharge bags, materials or coupons from formula companies, or formula



HOSPITAL SHOWCASE



ST. MARY'S HOSPITAL-AMSTERDAM

Located 35 miles west of
Albany

150-bed upstate community
healthcare system

500 Births per year
Level I Nursery

Patient Population
56 % Medicaid
13% Hispanic



Contact Information:

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Director of Women's Services-
Senior Leader

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HOSPITAL STAFF TRAINING



- Pre-assessment of staff knowledge
 - Evidenced base vs. current practice
- Formal training:
 - *Ten Steps to Successful Breastfeeding*
 - Used as the foundation for Breastfeeding Quality Improvement in Hospitals Learning Collaborative
 - Gained buy-in from resistant staff
 - Assisted in developing practical tools to support and encourage behaviors in families and staff that lead to successful early breastfeeding
- Ongoing Efforts:
 - Annual RN reviews include a minimum of 8 hours of breastfeeding focused continuing education
 - Identification of high leverage changes including rooming-in



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 diapers 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 FIDGETING WHEN SLEEPING

FEEDINGS	DIAPER CHANGES	
	URINE	STOOL
START TIME		

EXPECT YOUR BABY TO WANT TO FEED 8-10 TIMES A DAY,
WITHOUT ANY SPECIFIC TIME PATTERN.



TOOLS CREATED: CRIB CARDS

I'm Learning to Breastfeed!



Take me to my MOM when I am Hungry!

Tips for Breastfeeding

- ❁ Nurse your baby within the first hour of birth.
- ❁ Keep your baby with you.
- ❁ Watch for feeding cues.
- ❁ Nurse at least 8 to 12 times in 24 hours.
- ❁ Visit www.breastfeedingpartners.org
- ❁ Questions? Call: The Birthplace- 841-7314
WIC- 853-8355



BELLEVUE HOSPITAL

New York City urban public hospital, part of NYC Health and Hospitals Corporation

Approximately 2,000 births per year

Level III Nursery

Demographics of population served:

- 60% Latino
- 15% Asian
- 15% African American
- 10% Caucasian



Contact:

Dr. Susan Vierczhalek, Medical Director
Bellevue Breastfeeding Program:

susan.vierczhalek@nyumc.org



HOSPITAL STAFF TRAINING

- Comprehensive Breastfeeding Education for Hospital Staff
 - Comprehensive plan to educate all staff about the importance of breastfeeding
 - Based on the Baby Friendly Hospital Initiative (BFHI)
 - Intended Audience:
 - Social workers
 - Child life workers
 - Clerks
 - Dietary aides
 - Housekeepers
- Overall more positive atmosphere surrounding breastfeeding



STATEN ISLAND UNIVERSITY HOSPITAL

714-bed, specialized teaching hospital with a Level 3 Nursery

Located in New York City's 5th and fastest-growing borough

One of only two Staten Island Hospitals serving an ethnically diverse population of almost one-half million residents

3,000 births per year



Hospital Contact:

Lisa Paladino MS RNc CNM
Breastfeeding Initiative
Coordinator

718.226.8518 or

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BREASTFEEDING INITIATION AND SKIN TO SKIN CONTACT

- Evidence based education
 - Grand Rounds
 - Prenatal education
 - Maternal Child Staff Education
- Marketing
 - Posters
 - Bulletin Boards
- Updated Policy
 - Rewritten to include skin to skin
 - Eliminated routine heel stick for glucose on skin to skin infants
- Practice Change
 - Eligible for infants up to 2 hours



BREASTFEEDING INITIATION AND SKIN TO SKIN CONTACT

○ Results

- Since inception in 2008 all of the following have increased:
 - Rates of latch in Delivery Room
 - Breastfeeding Initiation Rates
 - Exclusive Breastfeeding Rates
 - Patient Satisfaction Scores





 STONY BROOK
 UNIVERSITY
MEDICAL CENTER



- Located on Long Island, Suffolk County
- Tertiary Care, Regional Perinatal Center
- 571 Patient Beds, 4800 Employees
- 3,725 Births in 2010
- 3.4% of all hospital admissions require language services with 79% being Spanish

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BREASTFEEDING INITIATION AND SKIN TO SKIN CONTACT

- **Educating** staff on benefits of S2S contact
- **Modeling language and behavior** for staff for completion of S2S
- **Conducting** “one pt at a time” trials of S2S for 30 minutes immediately after birth in L&D
- **Discussing/evaluating trials** with L&D nurse immediately after completion
- **Soliciting** feedback from pts re the experience, sharing feedback with staff (and sharing the unsolicited feedback as well!)
- **Encouraging** staff to continue “trials” with all pts for extended S2S
- **Celebrating and sharing** the successes with other L&D staff members
- **Documenting** of S2S in pt record



BREASTFEEDING INITIATION AND SKIN TO SKIN CONTACT

○ Results:

- Increased % of breastfeeding in the delivery room for both vaginal and C-section deliveries
- L&D RN independently modeling behavior and language
- Starting to do with MD deliveries
- Documentation on chart of Skin to Skin, Breastfeeding in the DR and part of newborn admission report when infant transferred to post partum



North Shore LIJ Huntington Hospital

Located in Huntington,
Long Island

Level II Nursery

Approximately 1550
births per year



Hospital Contact :

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Susan Goldman RN,BC,CNS
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FEEDING ON DEMAND



- Focus on breastfeeding infants receiving 8 or more feedings in 24 hours
- Initiated night time feeding plan
- Night time feeding plan had a large impact on increasing the amount of feedings in 24 hours
- Dramatic increase in the number of mothers choosing to feed at least once during the night



Night-time in the Hospital

It is the standard of care at Rochester General Hospital for both formula and breastfed infants to stay in the room with their mother 24 hours a day.

This has many advantages:

- Babies are sensitive to too much noise, light and handling. In mom's room, baby is only exposed to its family and a few care providers.
- Baby is comforted by familiar voices, touches and smells.
- Families get to know baby faster and can respond to the immediate needs of the newborn infant as only mother and family can.

Breastfeeding Your Baby

Mothers are encouraged to breastfeed their baby exclusively. This means that the baby receives nothing other than breast milk.

This is **especially important during the night** so that:

- Mom's milk supply will increase sooner.
- The hormone that makes the milk (prolactin) is higher at night. Take advantage of this important time!
- You can learn your baby's feeding cues.
- You can avoid breastfeeding problems due to early formula feeding. Formula should never be given without a medical reason.
- Any problems that may occur can be identified sooner when help is readily available.

My Night-time Plan for Today (Date: _____)

Tonight I would like my baby to:

- Room-in (baby stays in the room all night) ***This is your best choice for breastfeeding success.***
- Go to the nursery and be brought out to me for feedings.
- Be fed formula in the nursery. *I understand this may impact my success with milk production.*



Name: _____

Date: _____

NYU Langone Medical Center

Located in Manhattan
879-bed, not-for profit,
academic medical center
4,500 births per year
Level IV Nursery

Received Baby-Friendly
designation (2011)

Patient population

- Primarily private insurance
- High-income
- High educational attainment



Contact Information:

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Coordinator, Parent Education

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24-hour ROOMING-IN

- Mother-Baby Togetherness Posters
 - Educate staff and patients on the benefits of keeping mothers and babies together
- *Newborn Observation Area*
 - Changed the name of the *Nursery*
- New RN role--*Admit Nurse*--admits at the mother's bedside
 - One nurse is assigned to admit baby at bedside unless there is a medical indication for admitting in the NOA
- Partners Staying Over
 - Reclining chairs were purchased to offer partners the opportunity to stay over
- Scripting ID cards
 - Provide consistent information about rooming-in
- Newborn Physical Assessment at the Bedside
- Procedures at the Bedside

SCRIPTING ID CARDS

Explaining Best Practices:

Mother Baby Togetherness

"Congratulations, my name is _____. I am the nurse for you and your baby" (Vaginal)

"Congratulations, my name is _____ and I will be doing a physical exam on your baby and bathing the baby while you are being admitted to your room. I will return your baby once I am finished. It should be a very short time." (Cesarean Section)

"Keeping your baby at your bedside is a great way for you to learn your baby's cues and what it will be like when you go home. I'll be rounding on you and the baby every hour and will provide you and your baby with any care and assistance you may need."

"Keeping your baby with you is a great opportunity for me to teach you and answer any questions you may have about caring for your baby"



Responses to Encourage Mothers to Keep the Baby at the Bedside



"Research shows you are likely to get just as much sleep with your baby in your room as you would if your baby was in the Newborn Observation Area. (NOA) Babies who room in with their mothers cry less and are less likely to have trouble breastfeeding than those babies who are apart from their mothers."

"Your milk supply will come in sooner if you do not supplement. Your breast produces exactly what your baby needs. Breast milk works on supply and demand. The more you nurse, the sooner your milk will come in".

"We are here to support you however we can." If you chose to supplement your baby, we encourage cup feeding so the baby will have an easier time returning to the breast".





Located in Mineola, New York,
591 bed university affiliated
medical center

NYS designated Regional
Perinatal Center

Delivers 4600 newborns
annually

Population served is diverse and
congruent with the
demographics of Nassau
County

The New Life Center at Winthrop
University Hospital consist of:

7 exam/triage rooms

16 LDR's

(Labor/Delivery/Recovery) suites

3 operating rooms

6 bed PACU

The postpartum/antepartum units 63
obstetrical beds:

9 private rooms

36 semi-private rooms

Contact Information:

1-866-Winthrop

www.winthrop.org



ROOMING-IN

- Rooming-In at Winthrop
 - Passive implementation
 - “What can we stop doing?”
 - Done for all babies
 - Breastfeeding and Bottle Feeding Infants
 - Documentation changes
 - Now reflect rooming-in
 - Administration Support
 - Supporting facility re-design



Hudson Valley Hospital Center

Located in Westchester County,

About 1 hour North of NYC

883 Births per year

Level II Nursery

Patient Population

- ❖ 40% Community Health Center
- ❖ Spanish – primary language
- ❖ Low-income
- ❖ Low educational attainment



Contact Information:

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(Director MCH)

skeever@hvhc.org

Theresa Fay Conte RNC MSN
(Clinical Nurse Manager)



FORMULA SUPPLEMENTATION AND BOTTLE FEEDING

- Developed a supplementation policy to increase exclusive breastfeeding
- Placed formula in Omnicell to limit supplementation
- Have identified the following in the past 6 months:
 - Increase in exclusive breastfeeding rates
 - Improvement in documentation of supplementation (policy driven)
 - Education to parents about the benefits of breast milk and the risks of supplementation



ROCHESTER GENERAL HOSPITAL

528 bed acute care and teaching hospital

2500 deliveries/yr

C/S rate: 32%

Level II Nursery

70% Private – 30% Clinic

16 LDRPs,

4 bed triage,

5 bed overflow,

2 ORs,

18 private surgical beds



Contact info:

A. Lichtmacher, MD

S. Costanza, RN, IBCLC

C. Howard, MD

M.B. Stein, RN

W. Dwyer, MD

D. Milford, RN

S. Mullins, MD

D. Drake, RNC-OB, EFM



SUPPLEMENTATION AND FORMULA DISCHARGE BAGS

○ Supplementation

- Breastfeeding policy addresses supplementation
- MD order needed to supplement



○ Discharge Formula Bags

- Conference in '91-Took the message home: cleared out all formula bags from stock
- No vendors allowed on unit
- Parents with coupons are told dispensing formula is not part of RGH culture



IN CONCLUSION

“NY hospitals are in an excellent position -- the best position -- to promote and support exclusive breastfeeding.

The Breastfeeding Best Practices are so important that they are embedded in NY rules, regulations and laws.

The first step to supporting breastfeeding is to insure that your hospital's written Breastfeeding Policy includes the required components and that the staff carry that message to your patients.”

John Morley, MD
Medical Director,
Office of Health Systems Management



NEXT STEPS

- Hospital Staff training
 - Ten Steps to Successful Breastfeeding (on-line course)
- Written Hospital Breastfeeding Policy
 - Required to be compliant with NY Laws & Regulations
 - Should Anticipate Follow-up to First Review
- Implementation Guide & Quality Improvement
 - Guide includes examples of strategies
 - Technical assistance available
- Infant Feeding (Breastfeeding) Rates by Hospital
 - Reported on NYSDOH public web site (annually)
 - Must be included in Maternity Information Brochure and provided by hospital to pregnant women when they register and to maternity patients when admitted



ACKNOWLEDGEMENTS

Nirav R. Shah, MD, MPH
New York State, Commissioner of Health

Hudson Valley Hospital Center
St. Mary's Hospital- Amsterdam
Stony Brook University Hospital
Huntington Hospital
Staten Island University
Hospital
NYU-Langone Medical Center*
Rochester General Hospital *
NYCHHC-Bellevue Hospital
Center
Winthrop University Hospital

NYC DOHMH - Bureau of
Maternal, Infant, and
Reproductive Health
NYS DOH - Division of Family
Health
NYSDOH - Office of Health
Systems Management
Baby Friendly USA, Inc.
Members of the NYS
Breastfeeding Partnership
Team

* Denotes Baby Friendly Hospital designation



THANK YOU

For any questions or comments
please contact:

promotebreastfeeding@health.state.ny.us

