

Maximizing Breastfeeding Outcomes in the Outpatient Setting

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Faculty

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Part 1 Foundations of a Baby Friendly Office

Objectives

- Discuss the important elements of a written breastfeeding - friendly office policy
- Demonstrate knowledge in the following areas:
 - Providing informed choice for the breastfeeding decision, the physiology of lactation, medical contraindications to breastfeeding, and the risk of artificial feeding

Objectives

- Identify the essential elements of in - hospital care of the breastfeeding dyad and the physician's role in supporting this care
- Formulate strategies to address common breastfeeding issues experienced by the breastfeeding dyad during the first week following hospital discharge
- State the AAP's recommendation for duration of breastfeeding

Objectives

- State the importance of tracking breastfeeding initiation and duration rates in the practice setting and the utilization of that data to help increase breastfeeding rates

Alabama - Where We Are Now

- Alabama breastfeeding initiation
 - 2007 52.1%
 - 2013 60.4%
- Duration rates show great opportunities
- Alabama duration rates

	<u>6 months</u>	<u>12 months</u>
– 2007	25.4%	11.5%
– 2013	29.5%	14.2%

Healthy People 2020 Goals

- 82% - Breastfeeding initiation
 - Alabama 60.4%
- 61% - 6 months duration
 - Alabama 29.5%
- 34% - 12 months duration
 - Alabama 14.2%

*CDC 2013 Breastfeeding Report Card

Exclusive Duration

- | | <u>3 mo</u> | <u>6 mo</u> |
|-----------|----------------|--------------|
| • HP Goal | 40% | 17% |
| • U.S. | 37.7% (33 %) | 16.4% (13%) |
| • Alabama | 23.5% (24.8 %) | 9.1% (11.9%) |

*CDC 2013 & 2012 Breastfeeding Report Cards

The Breastfeeding Friendly Office Setting

Breastfeeding Friendly Office

- A Breastfeeding Friendly Office is important because it can provide an important element of the safety net the mother needs while breastfeeding in a culture that may not be supportive of her choice



AAP Recommends the WHO Ten Steps to Successful Breastfeeding

- Have a written breastfeeding policy that is routinely communicated to all health care staff
- Train all health care staff in the skills necessary to implement this policy
- Inform all pregnant women about the benefits and management of breastfeeding

AAP Recommends the WHO Ten Steps to Successful Breastfeeding

- Help mothers initiate breastfeeding within the first hour of birth
- Show mothers how to breastfeed and how to maintain lactation even if they are separated from their infants
- Give newborn infants no food or drink other than breastmilk, unless medically indicated

AAP Recommends the WHO Ten Steps to Successful Breastfeeding

- Practice rooming - in (allow mothers and infants to remain together) 24 hours a day
- Encourage breastfeeding on demand
- Give no artificial nipples or pacifiers to breastfeeding infants*

AAP Recommends the WHO Ten Steps to Successful Breastfeeding

- Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from hospital

*The AAP does not support a categorical ban on pacifiers because of their role in SIDS risk reduction and their analgesic benefit during painful procedures when breastfeeding cannot provide the analgesia

BFHI

- Provides a framework for enabling mothers to acquire the skills they need to breastfeed exclusively for six months and continue to breastfeed with the addition of complementary foods for two years and beyond

What's the Connection?

- WHO's BFHI or Ten Steps for Successful Breastfeeding are evidence based
- The scientific basis of many of these recommendations can be extended to the outpatient setting

What is a Breastfeeding Friendly Office?

- We have road maps...



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Primary Resources

- Academy of Breastfeeding Medicine Clinical Protocol # 14: Breastfeeding - Friendly Physician's Office: Optimizing Care for Infants and Children, Revised 2013.
- AAP's "How to Have a Breastfeeding Friendly Practice"
- AAP Ten Steps to Support Parents' Choice to Breastfeed Their Baby

Foundation of Those Efforts

- Written Breastfeeding Policy



Breastfeeding Policy

- After education has been provided for staff, the policy should be developed collaboratively
 - Gives you the opportunity to talk through some of the issues, biases, and misconceptions

Breastfeeding Policy

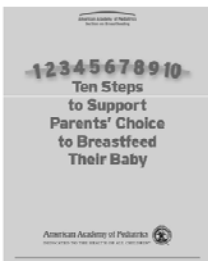
- People come, people go
 - Keeps everyone on the same page
 - When an issue comes up, you refer back to the policy

Breastfeeding Policy

- Provide the guidelines
 - Promotion
 - Effective informed choice
 - Protect
 - Care practices both in hospital and office setting

Breastfeeding Policy

- Support
 - Follow - up care
 - Knowledgeable and skilled



AAP Ten Steps to Support Parents' Choice to Breastfeed Their Baby

- Make a commitment to the importance of breastfeeding
- Train all staff in skills necessary to support breastfeeding
- Inform women and families about the benefits and management of breastfeeding

AAP Ten Steps to Support Parents' Choice to Breastfeed Their Baby

- Assess infants during early follow - up visits
- Encourage mothers to breastfeed on demand
- Show mothers how to breastfeed and how to maintain lactation when they will be away from their babies

AAP Ten Steps to Support Parents' Choice to Breastfeed Their Baby

- Use appropriate anticipatory guidance that supports exclusive breastfeeding until infants are about six months old, and encourage the continuation of breastfeeding as long as mutually desired by the baby and mother

AAP Ten Steps to Support Parents' Choice to Breastfeed Their Baby

- Support breastfeeding by providing accurate information about maternal issues
- Communicate support for breastfeeding in the office environment
- Expand the network of support for breastfeeding

1. Make a Commitment to the Importance of Breastfeeding



- Support the AAP recommendation that all babies are exclusively breastfed for around 6 months and then with the addition of complimentary food for at least a year

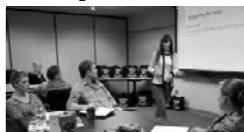
2. Train All Staff in Skills Necessary to Support Breastfeeding

- Identify at least one resource person on staff and facilitate the acquisition of advanced breastfeeding management skills
- Develop telephone triage protocols compatible with breastfeeding



3. Inform Women and Families About the Benefits and Management of Breastfeeding

- Encourage prenatal breastfeeding class



3. Inform Women and Families About the Benefits and Management of Breastfeeding

- Offer prenatal visits



4. Assess Infants During Early Follow - Up Visits

- 48 - 72 hours after discharge
- Evaluate for breastfeeding adequacy
- Educate parents



5. Encourage Mothers to Breastfeed On Demand

- 8 - 12 times a day



6. Show Mothers How to Breastfeed and Maintain Lactation When They Will Be Away From Their Babies

- NICU Mom



6. Show Mothers How to Breastfeed and Maintain Lactation When They Will Be Away From Their Babies

- Working Mom



7. Use Appropriate Anticipatory Guidance That Follows the AAP Recommendation on the Desired Duration of Breastfeeding

- Share information on duration early
- Be ready for questions
- What is a growth spurt? Is that why he is nursing a lot the last couple of days



7. Use Appropriate Anticipatory Guidance That Follows the AAP Recommendation on the Desired Duration of Breastfeeding

- If I stop breastfeeding will my baby sleep all night?
- Is he growing the way he should? My mother says he is not fat enough!



8. Support Breastfeeding By Providing Accurate Information About Maternal Issues

- Maternal Illness
- Medications
- Dental procedures
- Contraindications of illicit drug use



9. Communicate Support for Breastfeeding in the Office Environment



10. Expand the Network of Support for Breastfeeding

- Referral source in the community
- Know their background / training



Support

- The Affordable Care Act states that lactation services and supplies should be reimbursed at no co-pay for the mother
 - Services of a lactation consultant can be billed under physician provider number

Support

- See the *Breastfeeding and Lactation: The Pediatrician's Guide to Coding* at
 - www.aap.org/breastfeeding/initiative/documents/PDF/CODING.pdf

Support

- Keep a stock of breastfeeding supplies for the mother (breast pads, nipple shields, nipple cream, accessories for breast pumps, etc.)
 - Depending on insurance practices in the area, breastfeeding supplies can be charged to the child's bill if the mother is not separately registered as a patient

In a Nutshell

- **A Breastfeeding Friendly Office**
 - Supports the AAP recommendation that all babies are breastfed for at least a year
 - Explains to every patient that breastfeeding and formula are not equal, and breastfeeding is the best choice for the first year and beyond

In a Nutshell

- Removes formula marketing materials from the office
- Has pictures and posters that support breastfeeding
- Works to increase breastfeeding knowledge by all HCPs on staff
- Has current breastfeeding references available

In a Nutshell

- Knows breastfeeding referral sources in area
- Collects data on breastfeeding initiation and duration rates