



STEPPING UP YOUR BABY FRIENDLY GAME



Building Momentum Through Partnerships



AAP STATEMENT

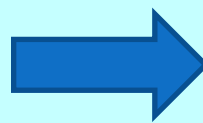
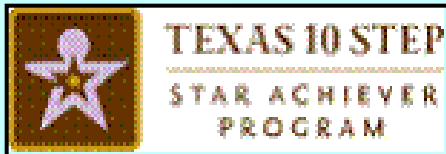
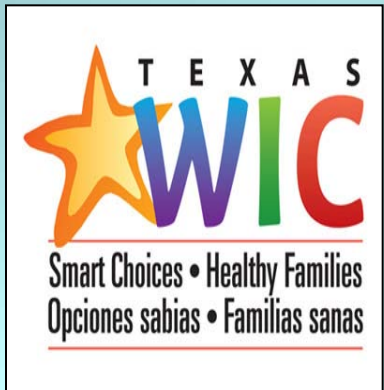
“ Breastfeeding and human milk are the normative standards for infant feeding and nutrition. Given the documented short- and long-term medical and neurodevelopmental advantages of breastfeeding, **infant nutrition should be considered a public health issue and not only a lifestyle choice**”








Lactation Care Center - Dallas

WIC Lactation Resource and Training Center

2600 Stemmons Freeway; Suite 188 Dallas, Texas 75207



HOSPITAL PEER COUNSELOR PROGRAM

1994	Parkland Memorial	 Parkland
2000	Methodist Dallas	
2000	Methodist Charlton	
2006	Mesquite Community	
2007	Baylor Irving	
2009	Doctors Hospital	
2014	Clements Hospital	



Challenge Defined

Baby Friendly Hospital Initiative – Step Two

“Train all health care staff in skills necessary to implement policy.”



Planning

Goal:

- To provide at least 3 hours of hands on experience for staff that met the requirements for *Baby Friendly*
- Workshop format
- Initially ~ 1000 nurses targeted
- Share resources

Timeline

Spring 2013

- Initiated Planning
- WIC, PHHS, MHS

Sept 2013

- Started trainings
- 4 sessions/month

Lessons Learned

Summer 2013

- CEU approval
- Create DVD
- Meeting 2-3 times/month

Since then

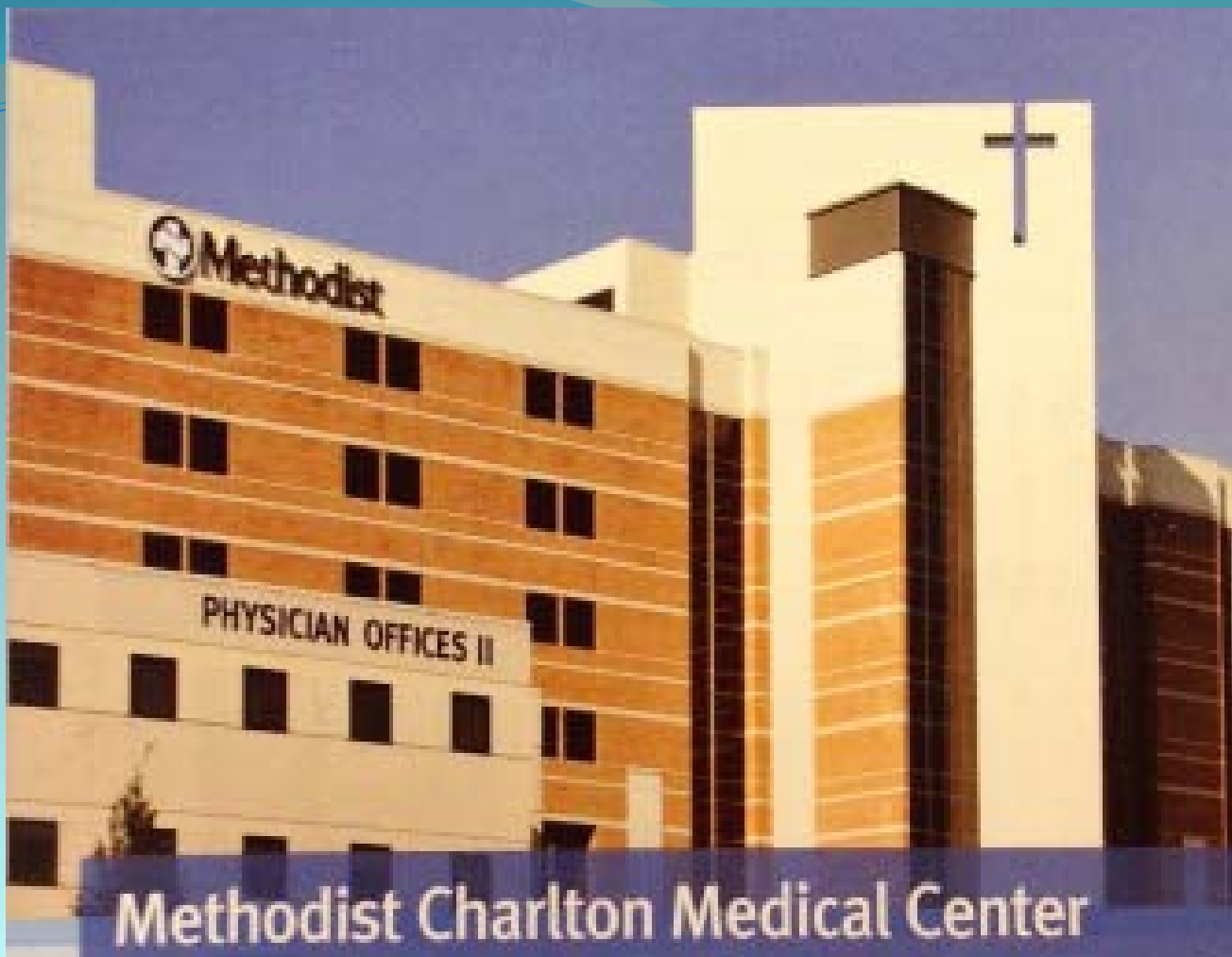
- Presentations at: USBC, TX Star Achiever, NICHQ
- Replication of training modules in other states!



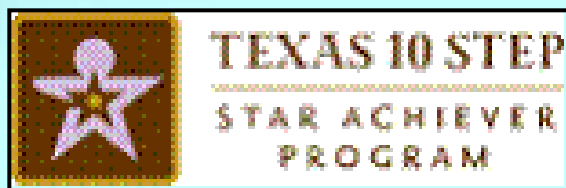


Six Content Areas

- Safe skin to skin care
- Hand expression
- Use of breast pumps
- Position and latch assessment
- Supplementation
- Positive messaging



Where Life Shines Bright



Mentoring Facility



Dissemination Phase

WIC Peer Counselors



EXCELLENT! *So helpful!*



Lisa
GREAT!

AWESOME!

Wonderful!

Loved her!

Adette



SKIN-TO-SKIN

NURSING INTERVENTION

IT'S NEVER TOO EARLY OR TOO LATE TO START!

JUST DO IT!

THE SOONER.....THE LONGER.....THE BETTER

Skin~to~Skin

- ❑ Define various terms used for skin-to-skin
- ❑ Stress safe skin-to-skin positioning
- ❑ Define Sudden Unexpected Postnatal Collapse (SUPC)
- ❑ 5 Criteria for SUPC
- ❑ Risk Factors for SUPC



Skin~to~Skin

- ❑ Students demo safe STS
- ❑ Critique pictures of babies STS
- ❑ Used principles of “The Magical Hour”
- ❑ “Growing Your Baby’s Brain” by Dr. Nils Bergman
- ❑ Dr. Susan Ludington & USIKC website



Practicing Safe Skin to Skin



SAFE POSITIONING FOR SKIN-TO-SKIN



- FACE CAN BE SEEN
- HEAD IS IN "SNIFFING" POSITION
- NOSE & MOUTH ARE NOT COVERED
- HEAD IS TURNED TO ONE SIDE
- NECK IS STRAIGHT, NOT BENT
- SHOULDERS ARE FLAT AGAINST MOM
- CHEST-TO-CHEST WITH MOM
- LEGS ARE FLEXED
- A LITTLE UPRIGHT, NOT FLAT, IN BED OR CHAIR
- COVER BACK WITH BLANKETS
- BOTH ARE WATCHED WHEN SLEEPING
- BABY IS BEING MONITORED

IF NO ONE CAN WATCH YOU AND YOUR BABY AFTER FEEDINGS AND WHEN SLEEP IS LIKELY, PUT YOUR BABY ON THEIR BACK IN THE BABY'S OWN FIRM BED

Hand Expression

- ❑ Describe benefits of hand expression
- ❑ Review literature citing increase in milk volume when using hand expression at the end of pumping session
- ❑ Describe effective steps to hand expression





Hand Expression

- ❑ Describe and demonstrate “hands-on-pumping”
- ❑ Each participant performed hand expression with a hand expression model
- ❑ Provided links to video clips of Jane Morton’s demonstration of hand expression and hand’s-on-pumping

Hand Expression





Where excellence is delivered daily.

Where life shines bright.SM



Methodist
HEALTH SYSTEM



Methodist
RICHARDSON MEDICAL CENTER



Position & Latch



Position and Latch

- ❑ Define aspects of an asymmetrical latch
- ❑ Signs of successful milk transfer for infant/mother
- ❑ Review positive messaging for assisting breastfeeding couplet
- ❑ Discuss common latch challenges





Position and Latch

- ❑ Observe pictures of proper position and latch
- ❑ Demonstrate position and latch with a doll
- ❑ Role play with participants and dolls
- ❑ Review LATCHES documentation tool

Parkland Health & Hospital System



Supplementation Tools





Supplementation

Evidence-based care

- ❑ Step 5: Show mothers how ... to maintain lactation, even if they are separated from their infants
- ❑ Step 6: Give the newborn infant no food or drink other than breast milk, unless medically indicated
- ❑ Step 9: No artificial nipples



What to Use and How?

What?

- Mother's milk
- Banked milk
- Formula

Other Tools

- Nipple shields
- Breast shells

How?

- Supplemental nursing system (SNS)
- Cup feeding
- Finger feeding
- Syringe
- Finger-syringe feeding
- Spoon
- Bottle



Reasons to Supplement

Infant Issues

- Baby unable to achieve an effective latch
 - Prematurity
 - Poor tone
 - Anatomical abnormalities
 - Fussy/ Sleepy
- Medically baby cannot breast feed
 - Galactosemia

Maternal Issues

- Illness
 - Too sick
 - Radiation therapy
 - Certain medications
- Infectious diseases
 - Active or untreated TB, HtLV -1, HIV
- Illicit drug use
- History of some breast surgeries
- Non-glandular breast development

Breast Pumps

- ❑ Verbalize reasons for mother/baby separation
- ❑ Reasons for the use of manual & electric breast pumps
- ❑ Review set-up and use of manual, single-user and hospital grade pumps





Breast Pumps

- ❑ Hands-on interactive practice assembling manual and electric pumps
- ❑ Participants identify proper uses for hospital grade, single-user and manual pumps
- ❑ Shown various flange sizes and how to ensure proper fit

Hands-on Training





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The Power of Positive Messaging





Positive Messaging

- ❑ Stress that change is hard for staff, patients and providers
- ❑ Use concrete examples
- ❑ Discuss “new” ways of talking to patients and peers
- ❑ Role Play/Problem Solve

LOVE Technique

- L ~ Listen
- O ~ Observe
- V ~ Validate
- E ~ Educate,
Empower, Encourage





**Baby~Friendly Designation
February 10, 2015!!!**

Successes

- ❑ 1500 participants
- ❑ Increased visibility of Hospital Peer Counselor Program
- ❑ Increased exclusive breastfeeding rates in the partnering hospitals
- ❑ Reaching beyond Dallas





Community





Thank You !

- ❑ Christine Wiseman, RN, IBCLC
City of Dallas WIC
- ❑ Reba Godfrey, RNC-MNN, IBCLC, LCCE
Methodist Charlton Medical Center
- ❑ Janice Ballou, DNP, PPCNP, IBCLC
Parkland Health & Hospital System
- ❑ Dani Cagle, BA, IBCLC
Methodist Dallas Medical Center
- ❑ Linda Jackson, MA, IBCLC, LCCE
Methodist Richardson Medical Center



Our Message to HCP.avi