Implementation and Evaluation of Transitioning Newborns at the Bedside: Skin-to-Skin Immediately After Delivery Maternal-Child Leadership Project

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BACKGROUND

Traditionally, mothers and babies are separated after birth. However, strong evidence exists that immediate skin-to-skin after birth between mother and baby has positive outcomes for both mother and baby. Babies who transition with their mothers have better breastfeeding rates and mothers who transition with their babies are more satisfied with the birthing process. Nonetheless, nurses are challenged daily with promoting skin-to-skin, especially after a cesarean delivery. West Kendall Baptist Hospital embarked on a journey to implement a new practice change of transitioning all eligible newborns at the bedside as part of the Baby Friendly Hospital Initiative (BFHI). The project was facilitated through collaboration with the STTI Maternal-Child Health Leadership Academy.

PURPOSE

To implement and evaluate the transitioning of newborns at the bedside emphasizing skin-to-skin immediately after delivery.

SPECIFIC AIMS

- To utilize leadership strategies to implement a Newborn Transition emphasizing Skin-to-Skin after Birth Maternal-Child Leadership Project
- To train all Labor and Delivery nurses to transition newborns at the bedside
- To transition all eligible newborns at the bedside
- To decrease separation time of couplets (i.e. the mother/baby dyad)
- To increase skin-to-skin initiation rates
- To increase exclusive breastfeeding rates
- To maintain patient satisfaction scores at or above 90%
- To increase exclusive breastfeeding rates

ORGANIZATIONAL CHANGE & LEADERSHIP CHALLENGES

Practice Environment
- New practice change for the unit
- Role expansion for all areas
- Staff discomfort with change initiative

Communication
- Hand-off between units
- Role delineation

Supplies
- Reorganization of supplies
- Accessibility of supplies

Training
- Staff Resistance
- Budget Burden
- Staffing Modification

Visitaiton
- Restrictive visitation guidelines
- Cultural Sensitivity
- Patient Satisfaction
- Patient Safety

Technical Needs
- Addition of new technology for barcode scanning for all areas

Leadership
- Inspire A Shared Vision
- Leadership Team Buy-In
- Staff Resistance to Practice Change
- Challenge the Process
- Transition at the Bedside
- Enable Others To Act
- Develop of Team Champions
- Model The Way
- Mock Demonstration of practice change
- Encourage The Heart
- Keeping the momentum

PROJECT ACTIVITIES

- A unit-specific taskforce made of key stakeholders was developed and lead by the STTI Maternal-Child Leadership Academy Fellow.
- The taskforce over a 6-month period:
  - Met monthly
  - Completed training for all Labor and Delivery nurses on transitioning at the bedside
  - Performed patient chart audits to monitor skin-to-skin initiation rates, breastfeeding exclusivity rates, and separation times
  - Tracked Satisfaction surveys of transitioning mothers

EVALUATION METHODS

- Staff Education Training data
- Monthly tracking of skin-to-skin initiation of all newborns data
- Monthly tracking of transitions of all eligible newborns data
- Monthly Press Ganey patient satisfaction survey results
- Monthly tracking of exclusive breastfeeding rates

PROJECT OUTCOMES

- 26 Labor and Delivery nurses were trained to transition newborns
- 782 patients were cared for during the 12 month period
- The number of infants transitioning at the bedside increased by 76%
- The skin-to-skin initiation rates increased by 68%
- Breastfeeding rates exceeded the national benchmark (81.9%) and increased by 8 %
- Mother satisfaction with bedside transition remained at or above the 90th percentile
- Achieved Baby Friendly Designation July 2015

LEADERSHIP JOURNEY OUTCOMES

- Inspire A Shared Vision
  Team came to understand the overall impact that we were making for both mothers and infants
- Challenge the Process
  Full buy-in from staff for the initiative
- Enable Others To Act
  Team Champions were able to continue to support and move project forward in my absence
- Model The Way
  Developed confidence to lead out loud and on purpose
- Encourage The Heart
  Team came to understand the overall impact that we were making for both mothers and infants
- We Are Baby Friendly
  Baby Friendly Designation Achieved July 2015

PRESS GANEY PATIENT SATISFACTION SCORES

DISCUSSION

Transitioning newborns at the bedside has a positive impact on skin-to-skin initiation rates, patient satisfaction, and exclusive breastfeeding rates. A Skin-to-Skin Right after Birth Maternal-Child Leadership Project may be a strong approach to accomplishing newborn bedside transitioning.

NEXT STEPS

- Baby-Friendly Consultancy
- Prepare for Baby Friendly Redesignation