Title:

Increasing Consumption of Mother's Breastmilk in the NICU

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References:

Myers, D., & Rubarth, L. B. (2013). Facilitating Breastfeeding in the Neonatal Intensive Care

Unit: Identifying Barriers. Neonatal Network, 32, 206-212

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Abstract Summary:

The purpose of this project is to promote the health and well-being of NICU babies by increasing the consumption of mother's breastmilk in the NICU.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will understand the attitudes of nursing staff related to breastfeeding.	Data from nursing attitudes survey.
The learner will be informed about the ratio of patients receiving breast milk in the NICU.	Data from chart reviews.

Abstract Text:

Background: The NICU environment can be stressful for babies, mothers and families, especially as NICU patients may be hospitalized for weeks or even months, depending on their gestational age and growth process. One way to promote the growth and development of a NICU patient is by ensuring the infant receives adequate nutrition through the consumption of mother's breastmilk. Mother's breastmilk is the optimal nutrition for NICU neonates as it promotes the immunological, gastrointestinal, developmental and psychological health of preterm and immature infants, promoting long term health. Providing mother's breastmilk, either by nursing the infant or pumping milk, can help promote emotional bonding between the mother and baby. Additionally, breastfeeding or pumping of breastmilk enables the mothers to contribute tangibly to caring for and promoting the health of her baby.

Unfortunately, breastfeeding neonates in the NICU can be challenging, as the neonates may be separated from their mothers, confined in radiant warmers or incubators, or require respiratory or intravenous support. Mothers who are interested and able to breastfeed or pump to supply milk to their

NICU infants may find it challenging if staff members lack the knowledge and confidence to promote and support breastfeeding or pumping practices. In circumstances where a mother is unable to provide breastmilk for her baby, it is possible to obtain outside sources of donor milk and/ or fortifier. Unfortunately, obtaining alternative sources of breastmilk are costly and require staff time and attention to manage the procurement and distribution process. A lactation consultant can help support both mothers, infants, and staff to ensure that mother's breastmilk is provided to the neonates in the NICU, however, currently, our NICU does not staff a lactation consultant.

A quality improvement project was developed as a component of the Maternal-Child Health Nurse Leadership Academy (MCHNLA) of Sigma Theta Tau International, and the program sponsor Johnson & Johnson. The fellow of the MCHNLA, Yesenia Sandino, BSN, RN, Leadership Mentor, Amber Clayton, MS, RN, and Dr. Julia Snethen, faculty advisor, developed a quality improvement project to address optimizing breastmilk consumption by NICU babies. The goal was to promote the health and well-being of NICU babies by identifying and addressing obstacles to the consumption of mother's breastmilk by all NICU neonates.

Purpose:

The purpose of this project is to promote the health and well-being of NICU babies by increasing the consumption of mother's breastmilk in the NICU.

Methods:

A quality improvement project was developed to promote the health and well-being of NICU babies by increasing the consumption of mother's breastmilk in the NICU. A pre-and post-test survey design was used to identify NICU staff nurses knowledge and attitudes regarding mothers breastfeeding or pumping breastmilk in the NICU. A pre-intervention chart review using a convenience sample of charts (n = 30) from NICU babies born at 30 to 36 weeks gestational age will be conducted to identify how many NICU babies were receiving mother's breastmilk. Exclusions to the chart review will include: social issue preventing mother access or participation, adoption, positive maternal drug screen, child protective services custody, or incarcerated mother.

Prior to initiating and developing the intervention to increase breastmilk consumption in the NICU, it was important to identify NICU staff nurse knowledge and attitudes regarding breastfeeding in the NICU. Therefore, a pre-test survey *NICU Mothers Breastfeeding Survey* (Myers & Rubarth, 2013), after permission was obtained from the author, was prepared to send out electronically to all 84 of the NICU staff nurses.

The intervention that was developed included having 7 breastfeeding champions receive training by a lactation consultant during an educational hands-on skills fair on the benefits and techniques for supporting mothers to breastfeed or pump breastmilk for their infants in the NICU. Once the training for the breastfeeding champions (n = 7) has been completed, the next step will be to implement the educational intervention to the NICU staff nurses. The intervention entails having the breastfeeding champions provide training to the NICU staff nurses on the benefits and techniques for supporting mothers to breastfeed or pump breastmilk for their infants in the NICU.

Following implementation of the training intervention, a post-test survey will be sent out electronically to the NICU staff nurses to evaluate their knowledge and attitudes regarding breastfeeding in the NICU. A post-intervention chart review (n = 30) will also be conducted, using a convenience sample of charts (n = 30) from NICU babies born at 30 to 36 weeks gestational age to identify how many NICU babies were receiving mother's breastmilk. Using the identical pre-intervention methods to obtain data on NICU admissions, the post-intervention chart review will begin July 1, 2017 until a sample of 30 eligible patients' charts to review is reached.

Results:

A pre-intervention chart review using a convenience sample of charts (n = 30) from NICU babies born at 30 to 36 weeks gestational age was conducted to identify how many NICU babies were receiving mother's breastmilk. The pre-intervention chart review (n = 30) found that 44% of the NICU babies 1^{st} 50 feeds included mother's breastmilk. The pre-intervention survey was sent out electronically to all 84 of the NICU staff nurses, and almost 2/3rds (n = 57) responded. The findings from the pre-intervention staff survey indicated that there were opportunities for improvement in staff knowledge and attitudes toward breastfeeding in the NICU. The training for the breastfeeding champions (n = 7) has been completed, the next step is to implement the educational intervention for the NICU staff nurses.

Conclusions:

Preliminary findings from the study suggest that additional education of the NICU nursing staff in needed as one strategy for increasing the consumption of mother's breastmilk in the NICU.

How to educate the mom's, techniques with holding their breasts during both breastfeeding and pumping, getting the baby to latch, and pumping techniques and frequency.