

NURSING CARE OF THE SEPARATED MOTHER/BABY PAIR PUMP EARLY, PUMP OFTEN PROJECT

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Purpose

The aim of this project is to increase the number of mothers, when separated from their newborns, begin collection of breastmilk within six hours of birth.

PICO Question

After a staff education intervention, based on best practice standards for lactation support developed by the WHO/UNICEF and in the LPCH Breastfeeding Policy, will there be an increased number of mothers separated from their babies beginning collection of colostrum within six hours of birth?

Background and Evidence Review

There is overwhelming evidence in the scientific literature of the critical effects on the health of infants when they receive human milk. The World Health Organization and collaborative scientific communities have determined that with rare exception, human milk is the optimal and exclusive food recommended for infants in the first six months of life. For infants born early and in vulnerable health states, therapeutic properties in colostrum (the first milk) have been identified as extremely impacting. Therefore, lactation support standards of care for separated mothers and infants have been established by the WHO/UNICEF in the Baby Friendly Hospital Initiative's *"Ten Steps to Successful Breastfeeding."* Developing and supporting these standards for the separated mother/baby pair is the goal of the project.

Methods

My project included a review of the application of current policies and procedures surrounding best practices of lactation support of the separated mother/baby pair. Chart audits of separated mothers were done to determine current performance of breastmilk collection. A teaching power point updating current knowledge bases and application of practices was done. The LPCH Breastfeeding policy was reviewed and skills update was offered to RN staff on the Maternity Units. Current feeding orders in NICU admission orders were reviewed. Literature supporting the health values of early milk for vulnerable infants was presented and discussed. Chart audits of separated mothers were done after the teaching interventions.

Results

Pre and post the teaching intervention chart audits data showed the number of mothers initiating collection procedures increased from 20% to 40%, or by 50 %.

Conclusion

Although the breastfeeding policy reflects current best practice standards, the need for refining application of procedures is evident. Education and support regarding the updated knowledge of the importance of early milk for premature infants should prioritize the practice of early breastmilk collection. The project should be sustained and presented to the entire nursing staff in the Maternity Units. Attention is needed to topics of availability of equipment, patient/family education, staff support, and knowledge of charting procedure. The group of pilot nurses who participated in the project have expressed eagerness to develop attention needed to continue education of the staff and adopt special practical projects to facilitate the practice of “pump early and often.”

Selected References

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Key words

Breastmilk, breastfeeding, breastmilk-feeding, Colostrum, lactation, premature infant.