Top Ten Reasons to Implement the Ten Steps

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Objectives

• At the end of this 30 minute session, the workshop participant will be able to:
  – Describe one key piece of evidence in support of each of the Ten Steps to Successful Breastfeeding
  – Implement the Joint Commission’s Perinatal Core measurement of ‘exclusive breastmilk feeding at discharge’ in one’s own hospital
# Reason 1: Evidence-based

<table>
<thead>
<tr>
<th>Step</th>
<th>Key Supporting Evidence</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>2: Staff Education</td>
<td>Staff training significantly associated with ↑ in exclusive BF rate (41% to 77%)</td>
<td>Cattaneo &amp; Buzzetti. <em>BMJ.</em> 2001.</td>
</tr>
<tr>
<td>3: Prenatal Education</td>
<td>Women encouraged to BF are 4x more likely to initiate BF; significant increases also seen for those traditionally less likely to BF (11x for single women)</td>
<td>Lu M. <em>Obstetr and Gynecol.</em> 2001.</td>
</tr>
</tbody>
</table>
Reason 1: Evidence-based

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<tr>
<td>5. Show Moms How to Breastfeed</td>
<td>Infants demonstrate significantly more innate BF behaviors, aiding in latching-on and sustained feeding, when placed prone on their mother’s abdomen with mother in semi-reclined position</td>
<td>Colson SD et al. Early Hum Dev. 2008.</td>
</tr>
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# Reason 1: Evidence-based

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<tr>
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<tbody>
<tr>
<td></td>
<td>- ↓ duration of full breastfeeding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- ↓ maternal BF confidence</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- maternal concern about poor milk supply</td>
<td></td>
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</tbody>
</table>
Reason 2: Improved BF Outcomes

- **Increased BF initiation**
  

- **Increased BF duration**
  

- **Increased BF exclusivity**
  

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NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 3: Maternal-Child Health Experts Recommend Breastfeeding

- Exclusive breastfeeding for the first 6 months
- Continued breastfeeding for *at least* the first year
Reason 4: Healthy People 2020

Surgeon General’s Healthy People Objectives
Increase proportion of mothers who breastfeed their babies:

<table>
<thead>
<tr>
<th></th>
<th>Any Breastfeeding</th>
<th>Exclusive BF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ever</td>
<td>At 6 mo</td>
</tr>
<tr>
<td>2010 HP goals</td>
<td>75%</td>
<td>50%</td>
</tr>
<tr>
<td>National</td>
<td>75%</td>
<td>43%</td>
</tr>
<tr>
<td>NH</td>
<td>78.6%</td>
<td>50%</td>
</tr>
<tr>
<td>VT</td>
<td>86.2%</td>
<td>58.4%</td>
</tr>
<tr>
<td>2020 HP goals</td>
<td>81.9%</td>
<td>60.6%</td>
</tr>
</tbody>
</table>

NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 4: Healthy People 2020

Breastfeeding Initiation

Any BF at 6 months


2007 NIS data

NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 4: Healthy People 2020

Exclusive BF at 3 months

Exclusive BF at 6 months


NH's Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 4b: 2 New Objectives added to Healthy People 2020

- Decrease % of breastfed newborns who receive formula supplementation within the 1st two days of life
  - ~12-42% US infants are currently supplemented with formula in the 1st 2 days

- Increase % of live births that occur in facilities that provide breastfeeding-supportive practices
  - ~16% US births currently occur in hospitals that are “Baby-Friendly”


NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 5: The Joint Commission Wants Your Exclusive Breastmilk Feeding Rates

- JC Perinatal Care Core Measure - #PC-05
  - Exclusive breastmilk feeding since birth
    - % of all term newborns fed breastmilk only* since birth with exception of newborns meeting specific exclusion criteria
      - e.g., infants < 35-36 weeks completed gestation, those admitted to NICU or transferred to another hospital during newborn hospitalization, or documented acceptable maternal medical reason for not exclusively feeding breastmilk
  - Improvement: ↑ in the annual rate of exclusive breastmilk feeding

* Breastmilk feeding includes expressed mother’s milk and/or donor human milk - both of which may be fed to infant by means other than suckling at breast
Reason 6: Benchmarking with the CDC

- CDC’s Breastfeeding Report Card
  - Process Indicators
    - % Any BF and Exclusive BF at birth, 3 mo, 6 mo
    - % BF infants who receive formula before 2 days of age
    - % births that occur in a Baby-Friendly (BFHI) facility
Reason 6: Benchmarking with the CDC

- Compare facility’s annual rate of supplementation of breastfed babies to rate reported by the CDC’s National Immunization Survey data for facility’s geographic region.

<table>
<thead>
<tr>
<th>Location</th>
<th>n</th>
<th>Formula supplementation before 2 days of age*</th>
</tr>
</thead>
<tbody>
<tr>
<td>US</td>
<td>12900</td>
<td>25.4 ± 1.4</td>
</tr>
<tr>
<td>NH</td>
<td>184</td>
<td>11.9 ± 4.8</td>
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</tbody>
</table>

*Percent ± % Confidence Interval


NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
CDC’s Maternity Practices in Infant Nutrition and Care Survey (mPINC)

- NH’s mPINC score = 81   Ranked # 1 /52

- Highest scores:
  - Availability of prenatal and postpartum breastfeeding instruction / counseling
  - Staff directly observe & assess breastfeeding

- Lowest scores re: peripartum practices:
  - Staff breastfeeding education / competency assessment
  - Initial skin-to-skin contact ≥ 30 min and 1st BF opportunity within:
    - 1 hr of vaginal delivery; 2 hr of c-section delivery
  - Separation of mothers and babies
  - Appropriate use of supplementation in breastfed infants
  - Hospital acceptance of free formula
  - All 10 model steps in place

http://www.cdc.gov/mpinc

NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 7: Benefits for Babies

Breastfeeding associated with significantly reduced rates of the following:

<table>
<thead>
<tr>
<th>For Infants</th>
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<tbody>
<tr>
<td>• Acute otitis media</td>
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<tr>
<td>• Atopic dermatitis</td>
</tr>
<tr>
<td>• Asthma</td>
</tr>
<tr>
<td>• Childhood leukemia</td>
</tr>
<tr>
<td>• Type 1 and Type 2 diabetes</td>
</tr>
<tr>
<td>• NEC</td>
</tr>
<tr>
<td>• Non-specific gastroenteritis</td>
</tr>
<tr>
<td>• Obesity</td>
</tr>
<tr>
<td>• Severe lower respiratory tract infections</td>
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<tr>
<td>• SIDS</td>
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</tbody>
</table>

with greater effects often seen with increased breastfeeding duration and exclusivity

43 primary studies; 29 systematic reviews & meta-analyses

NH's Ten Steps to Successful Breastfeeding: Step by (baby) Step
Reason 8: Benefits for Moms

Breastfeeding associated with significantly reduced rates of the following:

For Mothers

- Breast cancer
- Type 2 diabetes
- Ovarian cancer
- Postpartum depression

_with greater effects often seen with increased breastfeeding duration and exclusivity_

Reason 9: Benefits for Communities

• Improves the health of our communities
• Decreases utilization of health care resources
• Cost savings
  – If 90% families breastfeed exclusively for the first 6 mo of life:
    • An estimated 13 billion dollars/year will be saved in health care costs
    • 911 deaths will be prevented per year
Reason 10: Marketing and Prestige

Baby-Friendly™ Hospital
The Birth Center at APD has received the prestigious, international recognition as a Baby-Friendly Hospital since 1997. APD is one of only three hospitals and birthing centers in NH to have earned this distinction and the only Baby-Friendly hospital in the Upper Valley. Baby-Friendly Hospital Initiative (BFHI)

Why Choose Concord Hospital?
Concord Hospital is recognized as a Baby Friendly Hospital. There are more than 10,000 designated Baby-Friendly hospitals and birth centers worldwide. Currently there are 91 Baby-Friendly hospitals and birth centers in the United States. The “Baby-Friendly” designation is given after a rigorous on-site survey is completed. The award is maintained by continuing to practice the Ten Steps as demonstrated by quality processes.

Free Infant Formula: No More At Rhode Island Hospitals

NH’s Ten Steps to Successful Breastfeeding: Step by (baby) Step
References


References


