

Baby Friendly Hospital Initiative (BFHI)

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Breastfeeding in the NICU

- Determine the culture in the NICU and their stance in the support and encouragement of breastfeeding
- Survey staff to determine their culture and perception of breastfeeding
- Acknowledge barriers

Skin-to-Skin L&D

- Contact between mother and newborn, no blanket, no clothing in between, right after birth
 - Within 1st hour for at least 30 minutes
 - First feed should happen within 1st hour as well
- Clinical observations
 - Vaginal and C-section delivery
- Feedback from staff



<http://cdn.sheknows.com/articles/2013/04/newborn-skin-to-skin.jpg>

Background What is BFHI?

- Created by the World Health Organization (WHO) and United Nation's Children's Fund (UNICEF) in 1991
- Recognizes hospitals and birthing centers that fully support breastfeeding and mother-baby bonding
- Breastfeeding is a preventative practice
 - Benefits to baby and mom
- **The 10 Steps to Successful Breastfeeding**
- Step 7: Practice rooming-in
 - Benefits to breastfeeding
 - Allowing mothers-newborns to remain together ≥ 23 hours a day
- Gather baseline data
 - How do we maximize the amount of time the baby spends with mom and limit the amount of time the baby spends out of the room?
 - What percent of newborns are currently spending ≥ 23 hours rooming-in?
 - What is the most common rationale for taking the newborn out of the room?
 - What barriers are there to making the necessary changes?
- 4 Phases:
 - Discovery Phase (Completed)
 - **Development Phase (Current phase, to be completed March 2015)**
 - Dissemination Phase (To be completed March 2016)
 - Designation Phase (Completion determined by BFHI surveyors upon their decision)

Rooming-in MBU

- Log sheet for newborns time out of/time back in room and rationale
- Survey for staff to determine the culture and where the barriers are
- Maximize time baby spends in room and with mom by changes practices
 - Hearing screen and blood work bedside
 - Bring baby to discharge class
- 24% of newborns spend >23 hours rooming-in
- Most common rationale: bloodwork, hearing screen, initial assessment/bath, circucision, mom's request, discharge class
- Need a culture change

Better Care, Cost, Health

- Redevelop practices to focus on better mother-baby bonding and successful breastfeeding
- Terminate the use of existing tools and maximize use of time and labor
- Breastfeeding provides long-term health benefits for mom and baby

REFERENCES

"Baby-Friendly USA." *Baby-Friendly USA*. Baby-Friendly USA, Inc., 2012. Web. 13 July 2014.

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