

Birth And Beyond California:

Hospital Quality Improvement and Staff Training Project

Findings & Lessons Learned

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BBC Impact

- 3 RPPC Regions
- 7 Counties
- 23 Hospitals
- 685 Workshop participants
 - 198 Hospital administrators
 - 487 Learner Workshop

Decision Maker Findings

- Common primary barriers
 - Routine formula feeding
 - Lack of staff breastfeeding education and training
 - Separation of mother and baby
 - Lack of physician and staff “buy-in” to breastfeeding QI
 - Lack of ability to address the language and culture of patients

Evaluation Tools

- Hospital Self-Appraisal
 - 11 of 23 participating hospitals completed the California Model Hospital Breastfeeding Policies Self-Appraisal at three intervals
- Network evaluation tool
- Workshop Pre and Post Test
- Self-Efficacy tool

Multi-Disciplinary Quality Improvement



- Importance of hospital administration buy-in and support
 - Fiscal allocations
 - Identification of key partners within the hospital
 - Team development
 - Diversity within the team
- Policy writing and approval – more difficult than anticipated
- Need for physician and nurse champions

Multi-Disciplinary Quality Improvement

- Supported evidence-based practice
- Collaborative planning and priority setting
- Program/project implementation
- Program/project evaluation (data collection)
- Change management
 - Expanding the Collaborative
 - Ensuring Commitment
 - Ongoing QI

Value of Hospital Networks

- Sharing of resources, strategies and methods to support evidence-based maternity care
- Shared goals
- Shared successes
- Encourage collective goal setting
- Support education within the group
- Support autonomy of the group

Focus on skin-to-skin

- Incorporating modeling and practice
- Assuring infant safety



Sustainability

- Develop internal trainers
- Develop an education plan
- Support ongoing education
- Include breastfeeding competency in staff training



Challenges

- Training without additional funding
- Assuring infant safety
- Skin-to-skin for Cesarean births
- Acquiring physician support and buy-in
- Reducing formula supplementation
- Eliminating free formula bags

Challenges Not Encountered

- Physician resistance to skin-to-skin immediately after birth
- Family and staff did not object to skin-to-skin time before bathing the baby
- Visitors did not object when asked to leave to allow for skin-to-skin and bonding time
- Mothers did not object to not receiving free formula gift pack at hospital discharge

Recommended Steps for BBC Implementation

- Highly dependant on the individual facility
- While recommended – steps should be tailored to each facility
- Engage “experts” to provide the Decision Maker Workshop

Recommended Steps

- Conduct Decision Maker Workshop
- Form multi-disciplinary team
- Identify experts to assist in self-appraisal and trainings
- Review current breastfeeding rates
- Conduct Self-Appraisal
- Identify current or new data collection methods
- Review current policies and hospital procedures
- Participate in network
- Utilize QI process to monitor improvement

Recommended Steps - continued

- Plan, budget and implement staff education
- Acknowledge staff
- Celebrate positive movement
- Create and nurture trainers
- Utilize BBC Project to promote and market your hospital

Evolving Outcomes

- Move toward breastfeeding quality improvement and data collection in the perinatal area
- Project planning skills developed in nurse leaders
- Culture shift in hospitals
- Empowered nurses

Questions

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Please submit in your 'chat' box-to everyone

<http://cdph.ca.gov/BBCProgram>



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Birth & Beyond California: Hospital Breastfeeding Quality Improvement and Staff Training Demonstration Project Report

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The Birth and Beyond California (BBC) Project utilizes Quality Improvement (QI) methods and training to implement evidence-based policies and practices that support breastfeeding within the maternity care setting. The BBC Curriculum was developed as a result of collaboration among the [California Department of Public Health \(CDPH\)](#), [Maternal, Child and Adolescent Health \(MCAH\)](#) Division and [many local organizations and individuals \(Word\)](#) .

Utilizing the [Regional Perinatal Programs of California \(RPPC\)](#), this project provided participating hospitals with ongoing quality improvement (QI) technical assistance, resource development and on-site