Benchmark

Spotlight on Success: Woodland Memorial Achieves 100% Performance on Perinatal Measures

The birth of a child is a monumental transition in a parent's life. How each new parent adapts to this change depends a great deal on his or her own values, family history, health status, and culture. To better assist these transitions, health care organizations that provide perinatal and postpartum care, treatment, and services can help guide patients and their families to make healthy choices that are based on clinical evidence. One of the most critical of these choices is the decision to breastfeed. The World Health Organization (WHO) and the US Centers for Disease Control and Prevention (CDC) both recommend that mothers breastfeed exclusively for the first six months of their child's life, with breast milk in the child's diet for a minimum of one year. This provides optimal nutrition and immunological protection for infants and improves maternal health.1

Woodland Memorial Hospital, Woodland, California, is an exemplar organization in the area of supporting new mothers in their decisions to breastfeed. Woodland Memorial was the only hospital to receive recognition from The Joint Commission's 2014 *Top Performer on Key Quality Measures* program in review of their 2013 perinatal care measure set data. To become a *Top Performer*, a hospital must achieve a composite rate across all reported accountability measures that is greater than or equal to 95% (based on the rate obtained from the combined 12 calendar months of data). In addition, a hospital must achieve a rate greater than or equal to 95% on each and every applicable

Organization: Woodland Memorial Hospital, part of the Dignity Health System, is a 108-bed acute care hospital located in Woodland, California.

Description: The hospital pursued excellent performance on perinatal care accountability measures related to breastfeeding using Baby Friendly principles, as well as staff and patient education.

Outcome: Woodland Memorial achieved a 100% rate on measures PC-05 and PC-05a. The Joint Commission recognized Woodland Memorial as a *Top Performer on Key Quality Measures* for the perinatal care measure set in 2014 based on its 2013 data.



The staff at Woodland Memorial have made supporting breastfeeding mothers a priority in their hospital. From left to right: Eve Dunaway, MA, IBCLC, lactation consultant; Amanda Martinez, RN; Jennifer Mitchell, RN; Sara Lopes, RN; Anna Enriquez, RN, MSN, director, Family Birth Center

reported accountability measure in which there are at least 30 denominator cases (based on the rate obtained from the combined 12 calendar months of data). Visit http://www. jointcommission.org/accreditation

/top_performers.aspx for more information on the *Top Performer* program.

The perinatal care measure set currently consists of four measures, the following two of which address breastfeeding:

- PC-05: Exclusive breast milk feeding*
- PC-05a: Exclusive breast milk feeding considering mother's choice

Woodland Memorial achieved a rate of 100% on each of these measures during 2013 far exceeding national

(continued on page 8)

^{*} PC-05 is an outcome measure and does not factor into the hospital's composite rate.

Benchmark (continued from page 7)

benchmarks.² This means that the hospital provided an evidence-based practice 100 times out of every 100 opportunities to provide the practice. For 2013, the national composite rate for measure PC-05a was 69.2%, and PC-05 had a national composite rate of 53.6%. The national composite rate for the entire perinatal care measure set was 74.1%.*

This achievement was no small feat. "Measures PC-05 and PC-05a are the most challenging measures in the [perinatal care] measure set, says Celeste Milton, MPH, BSN, RN, associate project director in the Joint

* *Top Performer* recognition uses the previous year's data. Hence, recognition in 2014 is based on 2013 data.

Commission's Department of Performance Measurement. "Staff education and staff attitude towards breastfeeding varies greatly from health care organization to organization. The availability of prenatal teaching for mothers on the benefits of breastfeeding, along with postpartum support, are other issues related to patient acceptance and willingness to breastfeed. Cultural sensitivity is another concern, as well as staff having the ability to communicate with non-Englishspeaking patients, both verbally and with printed materials."

A Baby-Friendly Institution

Woodland Memorial faced many of the same obstacles, including the need for staff and patient education, language barriers, and patient concerns related to their culture. One advantage that the organization had was seeking Baby Friendly designation. As of August 2015, Woodland will

Going Baby Friendly

Woodland Memorial is a Baby Friendly hospital. This initiative has contributed a great deal to the hospital's successes in perinatal care, says Eve Dunaway, Baby Friendly Hospital Initiative coordinator and international board certified lactation consultant at Woodland Memorial.

The United Nations Children's Fund (UNICEF) and the World Health Organization launched the Baby Friendly Hospital Initiative in 1991, publishing the first set of Baby Friendly guidelines.¹ These guidelines were updated in 1996 and 2006, and were adapted specifically for US hospitals in 2004. The US guidelines are available at https://www.babyfriendlyusa.org/get-started

/the-guidelines-evaluation-criteria.

The initiative is based on 10 steps for hospitals to implement to support new mothers in their choice to breastfeed. The 10 steps are evidence-based practices designed to improve breastfeeding initiation and duration¹:

- 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
- 2. Train all health care staff in the skills necessary to implement this policy.
- 3. Inform all pregnant women about the benefits and management of breastfeeding.
- 4. Help mothers initiate breastfeeding within one hour of birth.
- 5. Show mothers how to breastfeed and how to maintain lactation even if they are separated from their infants.
- 6. Give infants no food or drink other than breastmilk unless medically indicated.
- 7. Practice rooming-in—allow mothers and infants to remain together twenty-four hours a day.
- 8. Encourage breastfeeding on demand.
- 9. Give no pacifiers or artificial nipples to breastfeeding infants.
- 10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

Woodland Healthcare does not accept free formula or free breastmilk substitutes. Parent discharge bags do not infant formula, logos, or literature of formula companies.

Reference

^{1.} Baby Friendly USA. The Baby-Friendly Hospital Initiative: Guidelines and Evaluation Criteria for Facilities Seeking Baby-Friendly Designation. Sandwich, MA: Baby Friendly USA, 2010. Accessed Jun 11, 2015. https://www.babyfriendlyusa.org /get-started/the-guidelines-evaluation-criteria.

have been a Baby Friendly hospital for 10 years. (See the sidebar on page 8).

The hospital's structure also served it well, according to Teresa Childers, director of quality and risk management at Woodland Memorial. "We are an integrated campus, with direct partnership with our clinic offices inside the hospital. When we began this initiative we collaborated with our outpatient staff within the organization as well as our inpatient units. This has worked well and significantly contributed to our success. Most physician offices are adjacent to the hospital, allowing them to have better access to patients pre- and postpartum," Childers explains. "The great majority of our patients receive prenatal and postpartum care in our outpatient offices."

Fostering Culture Change

One of the objectives that Woodland pursued is to make breastfeeding a cultural norm in the hospital for both patients and staff. This required a strong commitment from organization leaders. "The administration really supported Baby Friendly. They were on board from the very beginning," says Eve Dunaway, MA, IBCLC, a lactation consultant at Woodland Memorial who spearheaded much of the efforts that contributed to Woodland's success on the perinatal care measures.

An important next step was to gain staff buy-in, beginning with an intensive staff education program. "A leading contributor to our success was how available we were to provide education and hands-on learning," Dunaway says. "Our lactation consultants provide ongoing education to all clinical staff about the Baby Friendly Initiative, the importance of breastfeeding, and the strategies we use when working with patients."

Dunaway is a certified breastfeeding peer counselor through the Women, Infants, and Children (WIC) program of the US Department of Agriculture's Food and Nutrition Service. Peer counselors educate patients and colleagues about breastfeeding recommendations in a socially and culturally appropriate context and encourage breastfeeding as a critical component to the healthy development of the mother and baby. On Dunaway's recommendation, one staff member from each of the hospital's outlying clinics also received the WIC training and certification. These staff in turn educated their colleagues about breastfeeding in addition to working with patients.

The team at Woodland also developed a presentation that was presented to all staff, Dunaway explains. "This helped overcome initial barriers and obtain buy-in from health care providers, who were very supportive," she

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Hospitals and critical access hospitals that are seeking to improve performance on core measures should consider visiting The Joint Commission's Core Measure Solution Exchange[®]. The exchange is an online database of performance improvement solutions that have been implemented in health care organizations nationwide.

This exchange promotes the sharing of success stories among hospitals. In addition to being a valuable resource to hospitals seeking new solutions, the exchange provides hospitals with an opportunity to share their own success stories and make a difference beyond their own institutions. To date, 254 core measure solutions have been posted by hospitals that have dramatically improved and sustained their performance. The solution exchange is accessible via an accredited organizations' Joint *Commission Connect™* extranet site. In addition, any employee with an e-mail address from a Joint Commission-accredited health care organization is able to self-register for "Guest Access" on the extranet. Visit http://solutionexchange .jointcommission.org/Home/WebHome for more information.

says. "This also allowed me to get into the culture [at Woodland], and I made time to meet with any employee who had concerns so those could be addressed." Woodland also offered a skills fair to all clinical and auxiliary services staff that included education related to Baby Friendly and breastfeeding. "Our hospital's committment is to promote and support breastfeeding. With the extensive education and cultural shift, our nurses at the bed side are equipped to support and assure that our patients and families make the right choice," Dunaway says.

Woodland also provides breastfeeding support education to new staff, says Anna Schroeder, coordinator for Woodland Memorial. "Baby Friendly has become integral to our culture," Schroeder explains. "Our lactation consultant meets with each new employee, and they participate in an 80-question training module."

(continued on page 10)

Benchmark (continued from page 9)

Engaging the Patient and Family

Reaching staff is essential to the success of any new initiative. Even more crucial with regard to breastfeeding is reaching the patient. Woodland's lactation consultant begins meeting with patients at their obstetrician appointment at 32 weeks of pregnancy. She provides breastfeeding education and addresses questions and concerns. Patients also meet with the consultant in the pediatric clinic during the first and seventh postpartum weeks. Woodland provides patients with a wealth of written educational materials on lactation, the importance and benefits of breastfeeding, and the risks of formula feeding for both mother and newborn. Patients also may call a telephone hotline that Woodland offers to support families.

In addition to meetings with the consultant during lactation visits, patients can attend breastfeeding classes and a new family support group, lactation consultant Dunaway says. "The whole family is welcome to attend breastfeeding classes," Dunaway adds, "and also to come in for appointments. I am always happy to talk with husbands, mothers, aunts, grandparents or any family who needs this education. This can help increase support for breastfeeding within the family."

In some instances, mothers may be hesitant to breastfeed or find that their families are not supportive of their decision to breastfeed. The lactation consultant can help mothers navigate these difficulties. "I have found that most people will become supportive after they are educated about the benefits of breastfeeding and the risks associated with formula feeding," Dunaway says. Risks of formula feeding include lower protein volume, damage to the gut, and becoming more prone to certain infections and illnesses, Dunaway adds.

Family traditions and cultural objections, including concerns about modesty, can sometimes discourage mothers from breastfeeding. The lactation consultant can help mothers navigate these difficulties. The hospital serves a community of about 65,000 people. Demographically, the community is 45% Caucasian, 34% Hispanic, and 14% Asian-Pacific Islander, with a median household income of \$64,000. Approximately 50% of patients at Woodland's birthing center speak English as a second language or have a limited ability to communicate in English. Woodland provides written materials in both English and Spanish. Spanish interpreters are available on-site every week day from 8 A.M. to 5 P.M. For off hours and other languages, the hospital contracts with a telephone interpretation service.

Processed Human Milk Program

Despite the benefits of breastfeeding, some patients are unable to do so. This is often the result of a medical issue such as HIV infection or thyroid problems, or because the mother does not produce enough milk. In some instances, a history of abuse can adversely affect a patient's breastfeeding decision. Woodland Memorial provides assistance to these mothers through a breast milk donation program, allowing the babies of these patients to receive processed human milk via the Milk Bank of San Jose, California. Donated breast milk that has been screened for safety and pasteurized is an effective alternative when the birth mother is unable to breastfeed.³

References

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- 3. Panczuk J, et al. Human donor milk for the vulnerable infant: A Canadian perspective. *Int Breastfeed J*. 2014 Apr 17;9(4):1–4.