

CT Perinatal Quality Collaborative

Yale-New Haven Hospital-Quality Improvement Project
Well Newborn Team

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Our Team

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Lactation Program
Manager

Medical Director Well
Newborn Nursery
York Street Campus

Medical Director Well
Newborn Nursery
Saint Raphael's Campus

Post Partum Unit
York Street Campus

Lactation Consultant

Lactation Consultant

Background

- Yale New Haven Hospital:
 - YSC: ~4600 deliveries a year
 - SRC: ~1200 deliveries a year, Baby-Friendly Hospital
- Lactation team (for both campuses, combined):
 - Program manager
 - 2 full time, 3 part-time, 2 per diem
 - Average of 15-18 new consults/day (YSC), 5-6 (SRC)

Original Objective

- Primary Aim: To improve awareness of Lactation Services at YNHH through a variety of outlets:
 - Formally share Lactation Consultant work calendar and contact information to increase accessibility to community pediatrician and nursing staff
 - To streamline placement of consults in the electronic medical record system (EPIC)

Shift Happened

Our team identified a larger concern...

- The volume of consultations placed in EPIC in combination with the limited and seemingly inefficient use of lactation resources caused us to rethink our objectives

PDSA Cycle 1

- **PLAN:** Project Charter development
Define project measures to assess
Identify data collection tool
Collect and analyze baseline data
- **DO:** Develop and implement an intervention
- **STUDY:** Collect, analyze, and share post-intervention data
- **ACT:** Modify original intervention based on data collection and analysis

PDSA Cycle 1

- **PLAN:** **Project Charter development**
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Plan: Project Charter

- Background: The AAP recommends exclusive breast milk feedings for the first 6 months of life
- Mothers with a history of breast surgery, multiple gestation, ante-partum illicit drug use, infants requiring NICU admission, late preterm gestation, small for gestational age, difficult latch despite assistance by CLC or RN may require more specialized consultation

Plan: Project Charter

- Although every mother could benefit from working with a lactation specialist:
 - The current available resources at YNHH make this expectation impossible to fulfill
 - Trained post-partum nursing staff and CLCs can provide primary support to address the majority of issues without calling a formal lactation consultation
- Over-extending a limited resource can lead to:
 - Inadequate time spent with each mom
 - Inability to properly identify and assist those most at risk
 - Patient and staff dissatisfaction with the service

Plan: Project Charter

- Goal: To improve the education of post-partum staff with regard to appropriate placement of formal lactation consultations in EPIC via utilization of criteria designed to better identify mother infant dyads needing assistance from a lactation specialist:
 - Primary Aim: To increase the number of lactation consultations that meet well-defined criteria by 20%.
 - Secondary Aim: To reduce the number of lactation consultations that do not meet defined criteria by 20% via better education and utilization of post-partum nursing staff and CLCs as the first layer of breast feeding support.

Plan: Potential Barriers

- Lack of knowledge of existing criteria for consultation
- Lack of access to existing criteria for consultation
- Lack of education of post-partum RN staff regarding their critical role in the initial steps of lactation support
- Lack of time (given staffing issues) for post-partum RN to provide adequate lactation support

Plan: Potential Barriers

- Lack of appropriate ante-partum messaging to families
 - “Once admitted, you should ask to meet with one of the IBCLCs”
 - As opposed to, “We have a multidisciplinary team of lactation experts to assist you with breastfeeding including your post-partum nurse, CLCs, and when special circumstances or issues exist, a team of lactation specialists.”
- Lack of appropriate post-partum messaging to families
 - “I see you are having some difficulty, let me place a consult with one of our lactation specialists”
 - As opposed to, “I see you are having some difficulty. I am formally trained in providing lactation support. Let me see if I can assist you and if we run into any issues that I cannot address, I can call in one of our lactation specialists.”

Plan: Project Measures

A: Percent of Lactation consults placed in EPIC that meet the following criteria:

- Hx of breast surgery
- Multiple gestation
- Hx. antepartum illicit drug use
- Infant requiring NICU admission
- < 37 weeks gestation
- Birth Weight under 6 lbs (2.7 kg)
- Small for gestational age
- History of conception via IVF
- Cleft lip and/or palate
- Maternal special care unit admission

Additional Criteria:

- Two documented latch scores $\leq 7/10$
- Difficult latch after assisted by CLC or RN
- No latch within first 24 hours

B: Percent of Staff that are aware of the criteria and utilize the criteria for consult order placement in the electronic medical record

Plan: Baseline Data Collection

Our team tracked the following indicators via the EMR with data input into an Excel spreadsheet:

- The # of lactation consults placed
- The # of consults *meeting criteria*
- The # of *missed consults that met criteria*.
- Who is placing the consults?
- Documentation of latch score

Plan: Baseline Data Collection

| Number of Lactation Consults Placed in Epic* | Number of Consults that Met Criteria | Number of Missed Consults that Met Criteria | Primary Discipline who Placed Consult | Documented Latch Score |
|--|--------------------------------------|---|---------------------------------------|-------------------------|
| 89 | 46 (52%) | 36** | 94%-RN 6%-Clinician | 22% properly documented |

*Data collected over 8 days

**Missed consults included:

NICU babies

Small for gestational age

35-37 week late-preterm babies

< 6 lbs

Transfers from NICU to post-partum unit

Plan: Baseline Data Collection

- Questions asked of post-partum nursing staff:
 - Are you aware of the criteria needed for placement of Lactation Consults in EPIC?
 - Do you utilize the provided criteria list when deciding to place a consult in EPIC?

Plan: Baseline Data Collection

- 8 post-partum nurses polled:
 - 7 of 8 (88%) were aware of the list of criteria for consultation
 - 3 of 8 (38%) nurses said they “sometimes” use the list when deciding to place a consult
 - More experienced nurses felt that the list was more helpful for newer nurses and clinicians

Do

- Next steps:
 - Meet with nursing administration and garner secure support for education and training of post-partum nursing staff to act as first layer of lactation support
 - Done on September 16, 2015 and support obtained
 - Analyze data to better define barriers
 - Develop drop down menu in EPIC with criteria for lactation consultation
 - Educate post-partum nursing as well as OB and Pediatric medical staff regarding messaging to families prior to delivery, their role in the initial steps of lactation support, and when and how to place a lactation consultation