

Dumke College of Health Professions

### ANNIE TAYLOR DEE SCHOOL OF NICOTOR

### **ABSTRACT**

Years of research have identified breastfeeding as an essential factor in supporting childhood growth and development. Breastmilk provides optimal nutrition for infants and neonates. In addition, breastfeeding offers mothers and infants both psychological and economic benefits (1). Because of the benefits, the World Health Organization has recommended exclusive breastfeeding for the first six months of life (2). Yet according to the World Health Organization, only forty percent of children under six months are exclusively breastfed (3). Mothers of hospitalized infants have expressed concern about their lack of support in establishing breastfeeding and many hospitalized infants experience problems related to latching and low milk supply. However, there is currently no current breastfeeding training required for inpatient pediatric nurses. This MSN project aims to present and implement breastfeeding education to inpatient pediatric nursing staff on a local thirteenbed pediatric unit in order to fill in knowledge gaps and improve postnatal breastfeeding support for hospitalized infants. Additionally, breastfeeding resources for nursing staff and families were created to increase breastfeeding initiation, duration, and exclusivity.

### PICO QUESTION

In breastfeeding mothers, what is the effect of ongoing postnatal support in the pediatric inpatient setting on exclusivity and duration compared to only immediate postnatal education after birth?

### LITERATURE REVIEW

The literature review provided important support for breastfeeding education for both pediatric inpatient nurses and nursing mothers.

- Breastmilk provides essential infant nutrition (1).
- Breastmilk decreases gastrointestinal infections, respiratory infections, eczema, and infant mortality rates (5).
- Breastmilk promotes neurodevelopment (5).
- In addition to nutritional benefits, breastfeeding offers psychological and economic benefits to infants and their families (1).
- Breastfeeding initiation, duration, and exclusivity increase with early postnatal education provided by trained healthcare professionals (4).
- Retention of breastfeeding education right after birth is low due to emotional, physical, and mental strain of hospitalization and a significant life event (4).

## Postnatal Breastfeeding Education Support Plan:

Designed for Inpatient Pediatric Nurses

Elizabeth Willis BSN, RN, MSN Student

### PROJECT METHODOLOGY

The goal of this MSN project is to provide inpatient pediatric nurses with breastfeeding education and breastfeeding mothers of hospitalized infants with appropriate support and resources to increase breastfeeding duration and exclusivity. The following three outcomes support this goal:

- 1. Establish compulsory education for inpatient pediatric nurses related to breastfeeding support
- 2. Offer educational support to breastfeeding mothers during the postnatal period for hospitalized infants less than thirty days
- 3. Create and implement a breastfeeding questionnaire and action plan

### Plan and Development

Deliverables were created to ensure the success of the MSN project. The project deliverables correlate with the desired outcomes. The project deliverables include:

- Breast pump instructional poster and accompanying daily sim (Figure 1)
- Computer training module for nursing staff (Figure 2)
- Breastfeeding questionnaire
- Breastfeeding action plan (Figure 3)
- Detailed timeline

# Speed control Adapter port Suction control Power button

Figure 1

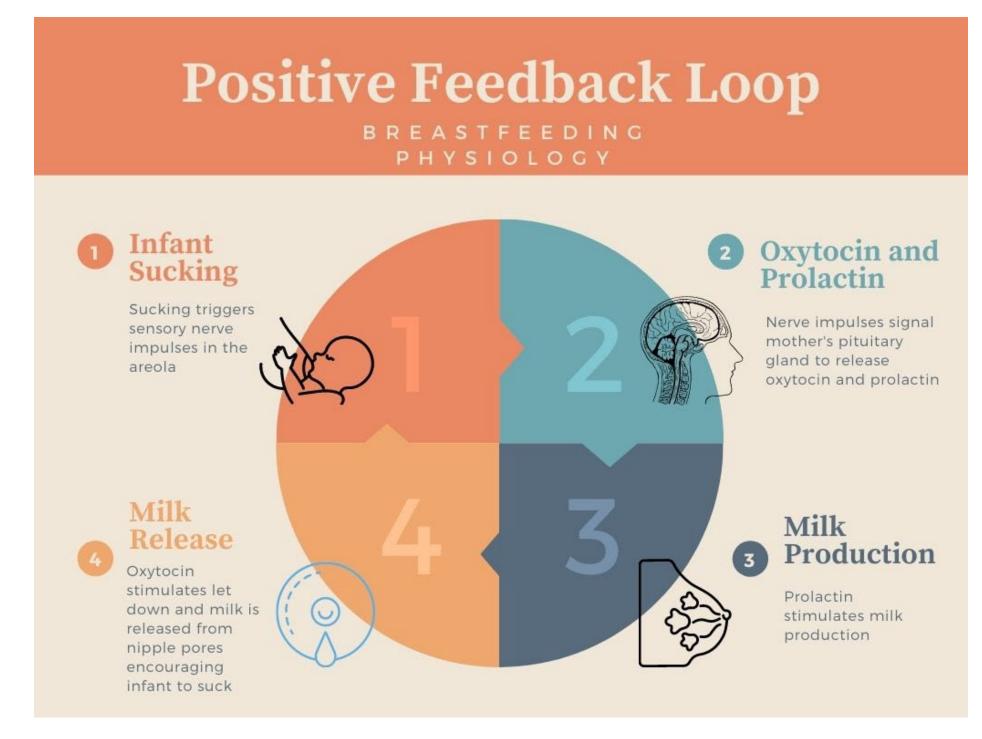


Figure 2

### **Evaluation**

Evaluation will measure the effective of the MSN project on breastfeeding initiation, duration, and longevity. Team collaboration with board certified lactation consultants will measure:

- Nursing staff perceptions on relevance of education presented
- Number of breastfeeding action plans distributed
- Follow up phone calls and scheduled outpatient consultations
- HCAPS scores featuring keywords such as "lactation," "breastfeeding," and "breast pump"

#### Breastfeeding Action Plan This breastfeeding action plan has been designed and personalized to help me set goals, document preferences, and identify resources. My Goal The most comfortable breastfeeding I want to breastfeed position for me is \_ (child's name) I can also use the \_\_\_\_\_ (number) days/weeks/months (circle one) Latch Supply When my child latches, I notice I am happy with my current milk supply their chin is touching the breast I would like to increase my current milk the nipple is near the roof of their mouth supply. To do so I will pump or hand the area is covered by flanged out lips express in between feedings. audible swallowing Support When I'm feeling overwhelmed or frustrated with breastfeeding, my support person is I can also call my local lactation consultant at Weber State Hospital 801–791–8916 Monday- Friday 8:00AM- 3:30 PM & Saturday- Sunday 8:00AM- 2:00PM **Additional Resources** Scan the following QR codes for additional information

Figure 3



### THEORETICAL FRAMEWORK

The John Hopkins Evidence-Based Practice Model is designed to meet the needs a practicing nurses using three designated steps:

- 1. Practice Question: A PICO question designed to solve an identified clinical problem
- 2. Evidence: Collection of evidence from multiple sources of evidences from various databases and clinical tools
- 3. Translation: The clinical appraisal of evidence gathered through the translation of both research and non-research evidence using an evidence appraisal tool

The John Hopkins Evidence-Based Practice Model also emphasizes the importance of interdisciplinary and team collaboration to ensure evidence-based practice.

### CONCLUSIONS

Current research highlights the physical, psychosocial, and economic benefits of breastfeeding for both infant and mother. However, recent literature also demonstrates a low breastfeeding exclusivity and duration incidence. Establishing successful breastfeeding is complex and requires ongoing postnatal education and support. This MSN project aims to expand nursing knowledge for pediatric inpatient nurses to provide the vital assistance breastfeeding mothers and infants need. The MSN project will also render educational moments for breastfeeding mothers. The tools developed within the project facilitate opportunities for a breastfeeding mother to ask questions, set goals, and identify valuable resources. In return, generations of infants and children will reap the health benefits of breastmilk and breastfeeding.

### REFERENCES

1. Moudi, A., Tafazoli, M., Boskabadi, H., Ebrahimzadeh, S., & Salehiniya, H. (2016). Comparing the effect of breastfeeding promotion interventions on exclusive breastfeeding: An experimental study. *Biomedical Research and Therapy*, 3(11), 910-27. doi:10.15419/bmrat.v3i11.132

2. Ansari, S., Abedi, P., Hasanpoor, S., & Bani, S. (2014). The effect of interventional program on breastfeeding self-efficacy and duration of exclusive breastfeeding in pregnant women in Ahvaz, Iran. *International Scholarly Research Notices*, 2014, 1–6. https://doi.org/10.1155/2014/510793 3.World Health Organization & United Nations Children's Fund. (2017, July). Global BF Collective Call to Action. Geneva, Switzerland. Retrieved from https://www.who.int/publications/m/item/global-breastfeeding-collective---a-call-to-action

4. Balogun, O. O., O'Sullivan, E. J., McFadden, A., Ota, E., Gavine, A., Garner, C. D., Renfrew, M. J., & MacGillivray, S. (2016). Interventions for promoting the initiation of breastfeeding. *Cochrane Database of Systematic Reviews*. https://doi.org/1002/14651858.CD001688.pub3. 5.Belfort, M. B. (2017). The science of breastfeeding and brain development. *Breastfeeding Medicine*, 12(8), 459–461. https://doi.org/10.1089/bfm.2017.0122