Community Pediatrics, 2002-3

Community Pediatrics resident project sub-tasks for the BFHI

1. Fundraising/grants (in place of formula company donations: formula, bassinet labels, maternal discharge bags)
   - Identify foundations that have contributed to other BFH to purchase formula
   - Identify foundations in NYC/NY State that focus funding to maternal and childhood health initiatives
   - Determine feasibility of establishing a “Babies Bottles” Fund – a CHONY based fund to which individuals can contribute [in small monetary increments] to support the purchase of formula, breastfeeding supplies, breastfeeding and infant nutrition information, and maternal discharge bags
   - Design letter writing campaign for contributions for directed funding of projects within the BFHI (discharge bags, pumps, BF room contributions, BF library etc.)

2. Policy review
   - Examine the policies that must be in place to establish a BFH (see the WHO guidelines)
     1) Have a written breastfeeding policy that is routinely communicated to ALL health care staff.
     2) Train ALL health care staff in 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 half hour of birth.
     5) Show mothers how to breastfeed and maintain lactation, even if they should be separated from their infants.
     6) Give newborn infants no food or drink other than breastmilk, unless medically indicated.
     7) Practice rooming in.
     8) Encourage breastfeeding on demand.
     9) Give no artificial teats or pacifiers to breastfeeding infants.
    10) Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.
   - Examine the current hospital policies and practices that already satisfy those set forth within the BFHI and determine which of the current policies require re-implementation or enforcement to adequately satisfy the BFHI
     1) New York Code Rules and Regulations (NYCRR 405.2) Hospital Regulations Concerning Breastfeeding. The OB/GYN Division of Nursing has adopted these policies and they are outlined in the syllabus for the nursing breastfeeding class. Similar policy is also in place at the Allen. However, at this writing it is still unclear what if any policies are present for other nursing divisions (NICU, Well Baby Nursery, General Ward, and PICU) and for clinical and non-clinical staff.
     2) Of the ten steps to successful breastfeeding set forth by the WHO steps 1-5, 7, 8, &10 are already being implemented BUT NOT UNIFORMLY! Step 6 requires the hospital to purchase its own formula at market price. Step 9 can easily be implemented by marking each infant bassinet with a card indicating that the baby is being breastfed and therefore should no receive a pacifier. These cards are often placed on the infant bassinets at the Allen but are rarely seen on bassinets at CHONY (Sloane). Rooming in is also a more common practice at the Allen than it is at CHONY (Sloane).
3) Lactation specialists seem to be more accessible at CHONY with the presence of the three person service of certified lactation consultants. These women provide formal teaching to groups as well as individualized support via daily rounds through the post-partum unit and are on-call to support mothers in the NICU and general ward services. They provide a booklet about breastfeeding to new mothers. Allen does not have a comparable team of in house lactation specialists. Best Beginnings, a Washington Heights based family support network affiliated with CHONY, has a cadre of counselors who have received extensive training in lactation support (including 1-2 certified lactation consultants). This group rounds every other day at Sloane and Allen visiting both Best Beginnings affiliated and non-program affiliated mothers providing them with post-natal counseling that includes breast-feeding support. Finally WIC provides educational support at both its hospital (VC4) and off site (W170th Street) locations.

4) Formal educational program for residents, fellows and faculty on breastfeeding (physiology, benefits based on best evidence, and how to provide support to mothers) should be implemented (see #10).

5) CHONY receives almost ALL of its formula from either Ross or Mead Johnson. In order to become a certified BFH, CHONY must divest itself of the current contracts which provide free formula.

6) The division of nursing policies are NOT uniformly implemented at CHONY or Allen in the post-partum, well baby and NICU divisions. Many mothers who enter the hospital (especially at Sloane) intending to breastfeed are undermined in their efforts by staff who do not adhere to the baby-to-breast within one hour, rooming in, and breast feeding on demand provisions set forth in hospital policy. Formula is often given to well full term infants by staff even when mothers have expressly communicated that they want to exclusively breast feed. Mother’s are told that the infants will become hypoglycemic or dehydrated within the first 24-48 hours of life if the infants are not provided formula to supplement breastmilk — information that is misleading and generally false! Some, but clearly not all, nurses have received specific training in lactation and lactation support at both CHONY and Allen (personal communication with Carmen Fuentes, Allen Pavilion and Patricia Holahan, CHONY). Within the next year ALL nurses in the post-partum division at Sloane will have competency requirements in breastfeeding and lactation support. This is not a current nursing requirement at the Allen nor in the NICU or Well Baby nursery at CHONY.

3. Determine formula usage at CHONY
   CHONY has established service contracts with Ross and Mead Johnson for the infant formula supplied to the hospital. Mead Johnson products are available January-June and Ross products are available July-December. Orders are placed with the Infant Formula Laboratory Service in Brooklyn, NY (718-257-3110) and invoices are sent directly to these companies for billing. Specialized formulas and supplies (e.g. bottles, nipples, and pacifiers) are items for which CHONY is billed directly. This cost amounts to approximately $1000 - $2000 per year according to the representative at the Brooklyn Formula service. (Interestingly, it seems that the Cornell campus is billed directly for much of its formula.) The TPN pharmacy at CHONY places all infant formula orders. Usage is grossly estimated. Pharmacy staff make daily rounds to the formula stock rooms of each floor in CHONY and determine which
formula needs to be re-stocked. They keep track of daily orders on a weekly basis. Records are not centralized or tracked and the hand written logs are discarded on a monthly basis. An actual bottle by bottle consumption rate is neither recorded nor calculated either by nursing or the pharmacy staff. Orders are placed by the case. Thus the actual usage rates and requirements of infant formula is unknown. In a one-week period in early January 2003, approximately 85 cases of infant formula were ordered for CHONY (Floors 6S, 8S, 9, 10S, 11S and 12).

4. Contact other NYC area children’s hospitals to determine if they are working on a similar initiative to become a BFH
   - Cornell – not currently pursuing the initiative
   - Montefiore
   - Sinai
   - North Shore
   - Westchester

5. Contact WIC (Ivette Santiago) to outline the specific support that they give for breastfeeding mothers
   - Nutritional support
     1) Mothers who exclusively breast feed receive extra vouchers for nutritional supplements (tuna, carrots, milk, cheese) equivalent to ~$60.00/month.
     2) Mothers who both breast and formula feed receive nutritional supplements and reduced amount of infant formula equivalent to ~$140.00/month.
   - Educational support
     1) All mothers who apply for WIC receive breast-feeding education as part of the WIC requirement. These educational sessions occur at all WIC centers.
     2) Mothers who indicate that they intend to breast-feed are contacted individually via WIC for additional education and support.
     3) A certified nutritionist and lactation consultant who is available to assist mothers (both WIC and non-WIC) with breastfeeding staffs the WIC center located on VC-4 at NYPH-Columbia.
     4) The WIC office on W170th Street is a Outreach Breastfeeding Help and Referral Center focused on lactation support and is staffed by a certified lactation consultant who sees new mothers by appointment in addition to making rounds at the Allen Pavilion post-partum unit to provide individualized teaching to new mothers prior to hospital discharge. Contact Person: Marilyn Figueroa, Breastfeeding Coordinator (212-928-0182) or Marilyn Martinez, Breastfeeding Peer Counselor Coordinator (212-928-0853); Hours: Monday through Friday, 9 a.m. to 5 p.m.

6. Recruiting volunteer breastfeeding “consultants” from women who live locally (utilize Alianza Dominanca Inc. Best Beginnings Program as the base?)
   - Meet with Best Beginnings director and counselors (Sobeira Guillen, MSW, CSW Program Director).
   There is a cohort of women who have already been trained and certified as in breastfeeding. The Best Beginnings program has incorporated a “breastmilk is best” policy into its mission and training of counselors (all women) includes a 12 week
curriculum that includes one week dedicated to breastfeeding education. Many of these women are also personally experienced having breast fed their own children. Part of the work that these counselors do includes rounds at both Sloane and Allen post-partum units where they meet with Best Beginnings affiliated and non-affiliated mothers to provide post-natal counseling including individualized breast feeding support. Once these mothers are discharged from the hospital, those who are affiliated with Best Beginnings are visited weekly by their counselors and encouraged to continue exclusive breast-feeding. Non-program affiliated mothers are also invited to the Best Beginnings site (within the Alianza Dominican Inc offices at 2410 Amsterdam Avenue in Washington Heights). Here they can avail themselves of a newly refurbished lactation room that includes electric pumps for use and the support of the trained counselors and a certified lactation consultant (Ms. Rayza DeLa Cruz-Stitt, RN, MSN and Coordinator of Health and Education). Best Beginnings has a no formula policy and none is available for distribution at the site.

- Establish a volunteer curriculum with the assistance of the certified lactation consultants.
- Obtain security clearance for the core of volunteers to have access to post-partum units.
- Establish a monthly calendar for volunteers to visit post-partum units at Allen and Sloane to meet with new breast feeding mothers individually.

7. Needs assessment and cost projection for:
- permanent in-house lactation consultant at Sloane and Allen
  1) The Parent Education Center is the permanent office for the lactation consultants who work in house at CHONY/Sloane. There are two part-time and one full time consultant. The consultants organize pre-natal classes that include current information and advice about breast-feeding. The consultants provide lactation support to mothers while they are hospitalized and are also available to assist new mothers in the NICU and on the general ward service.
  2) Allen has now hired permanent lactation consultant (Fall 2003)
- The establishment of a walk-in breastfeeding center that serves as the “main office” for lactation consultants to meet one-on-one with new mothers who need assistance with breast feeding and also provides lactation supplies for purchase/rent
  1) The lactation specialists at the Parent Education Center have just received funding to sell and rent breastfeeding supplies (pumps, brassieres). These supplies will be distributed out of their office on Babies 6South. There are no current plans for a stand alone breast feeding center, however the new hospital plans will include a permanent classroom for the lactation consultants to use for their parent education classes.

8. First baby appointment. within 3-5 days of d/c if BF mom
- Determine current procedures for scheduling first pediatrician visit to ACNC clinics by the Allen and Sloane post-partum units.
- Devise a simple procedure for new mothers to identify themselves as exclusive BF and to request a most convenient ACNC clinic location to the appointment scheduler.
- Meet with nursing supervisors at Allen and Sloane to discuss implementation and support of the plan to obtain early appointments for BF babies.
9. Feasibility of including prenatal visits as part of the schedule at the ACNC sites
   - Survey of prenatal clinics (OB/GYN) to determine whether expectant mothers in the community would be interested in meeting/choosing a pediatrician prior to the birth of their child
   - Work with the hospital graphic design department to design a bilingual flier that includes the following information:
     - Description of the ACNC pediatric clinic sites:
       - Location, days of operation, administration, numbers of attending faculty, numbers of residents
     - “Steps to preparing for your baby”:
       - List of basic items families should acquire prior to the infant’s arrival (car seat, crib/bassinet, thermometer)
       - How to locate a pediatrician through ACNC and goals of a prenatal visit with a pediatrician
   - Distribute flier and provide a current listing of pediatric residents and faculty (who are accepting new patients) to expectant mothers within the last 3 months of pregnancy via the OB/GYN practice sites

10. Establish Curriculum on Lactation for Pediatrics
    - Noon Seminar Series
      1) The Basics of lactation physiology
      2) How to help Mom’s breastfeed their Babies
      3)
      4)
    - Grand Rounds Speaker
    - Web Based Curriculum Didactic
    - Outreach Seminar(s) for OB/GYN Residents