Implementing Evidence into Lactation: Journey of a Community Hospital
Kristie L. Coe, RN, MSN
Duke Medicine
Tammie Gullie (Presenter)
Tammie Gullie, Janet Gammage
Durham Regional Hospital

Problem: A new Lactation Service was created in July, 2010 at this community hospital with few guidelines/policies and no metrics for measuring success.

Evidence: Policy creation and practice were based on references such as Breastfeeding Medicine, Journal of Human Lactation, AWHONN, & other guidelines and The Joint Commission's Perinatal Core Measure- Exclusive Breast Milk Feeding was used for measurement.

Strategy: Bimonthly to monthly meetings were coordinated by primary unit's Educator and held near the Mother-Baby unit. Issues were discussed such as proper positioning to prevent soreness, late preterm infants, and cluster feeds. The evidence was reviewed by team members and discussed with the group. Data related to current breastfeeding rates was presented.

Practice Change: The Lactation Team has moved from a problem-based Service to consultative based on the unit/mother's needs. Staff have been educated by the Lactation Consultants in team huddles and with formal training. A Breastfeeding Policy has been created and approved by nurses, pediatricians, and others. Baby staying with mom 20+ hours per day has been implemented. Data is presented monthly at Perinatal meetings.

Evaluation: The Lactation Team is growing to include one full time and several part time staff. They are currently covering six days per week and considering seven. Staff now feel empowered to assist mothers with breastfeeding and Exclusive Breastfeeding and "Ever" Breastfeeding rates have steadily climbed in the institution.

Results: The Lactation Team is currently applying for "Breastfeeding Friendly" status using the "Ten Steps to Successful Breastfeeding" by the WHO. (Rates will be presented after Institutional Review Board approval)

Recommendations: Review of the Literature is very important when implementing a new program to educate staff, involve Medicine and create policies for practice. Educating staff can be accomplished by formal and informal education. Implementing a Lactation Program supports continuous rooming-in of infant with mother after birth.
Lessons Learned: The Literature is your Companion! If we all practice by it, our practice is more successful and our patients are less confused. Education of all units and disciplines is necessary for success.

Bibliography:
