

Colorado Hospital Breastfeeding Policy Survey

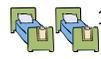
April 2012

BACKGROUND: Hospitals with breastfeeding policies are more likely to have quality lactation support services and improved breastfeeding outcomes than those without comprehensive policies.¹ Following a statewide effort to educate and train hospital staff on the *Colorado Can Do 5!* initiative, staff at the Colorado Department of Public Health and Environment (CDPHE) conducted a hospital survey to measure the existence of breastfeeding policies inclusive of five specific breastfeeding supportive practices and to learn how policies are communicated to staff. These five practices found in Colorado to increase breastfeeding duration of healthy infants include: 1) infants are breastfed within the first hour; 2) infants room-in with their mothers; 3) infants are fed only breast milk and receive no supplementation; 4) infants do not use a pacifier in the hospital; and 5) mothers are given a telephone number to call for help with breastfeeding after discharge.²

METHODS: A 16 question survey was mailed electronically to three individuals at each of 52 Colorado hospitals with maternity services. Targeted individuals represented the positions of Chief Executive Officer or Chief Nursing Office, mother/baby unit manager (or equivalent) and lactation specialist. The survey instructions directed the representatives to work together and complete one survey for their facility. In addition to policy related questions, the survey contained open-ended questions to gather information on the barriers to specific breastfeeding supportive practices, including the *Colorado Can Do 5!* practices, as well as information to inform CDPHE of potential ways to assist hospitals toward implementing these practices.

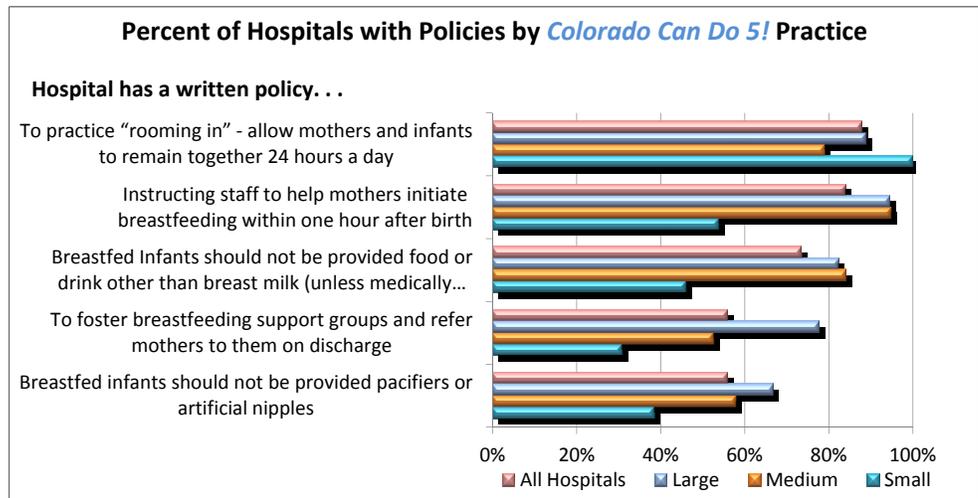
RESULTS: **Forty-nine hospitals completed the survey.** Hospital results were organized into three groups based on number of births in 2008. The numbers of hospitals completing the survey (with a range of births in parenthesis) are described below.

 13 of 14 hospitals with fewer deliveries (11-296)

 19 of 19 hospitals with a mid range number of deliveries (337-1497)

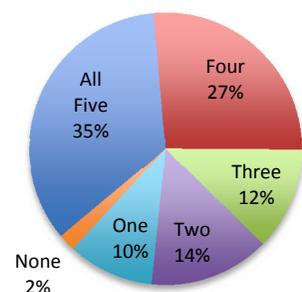
 17 of 19 hospitals with the largest number of deliveries (1550-5272)

The graph at right illustrates which practices that are most likely and those least likely to be described in Colorado hospital policies. Among all hospitals (pink bar), 88 percent report having a policy to practice rooming-in. At the time of the survey only 56 percent of hospitals had a written policy regarding pacifier use and 56 percent had a policy to refer mothers to support groups on discharge.



Over one-third (35%) of hospitals reported having policies for all five *Colorado Can Do 5!* practices as depicted in the pie chart. Hospitals with fewer births were less likely to report having policies.

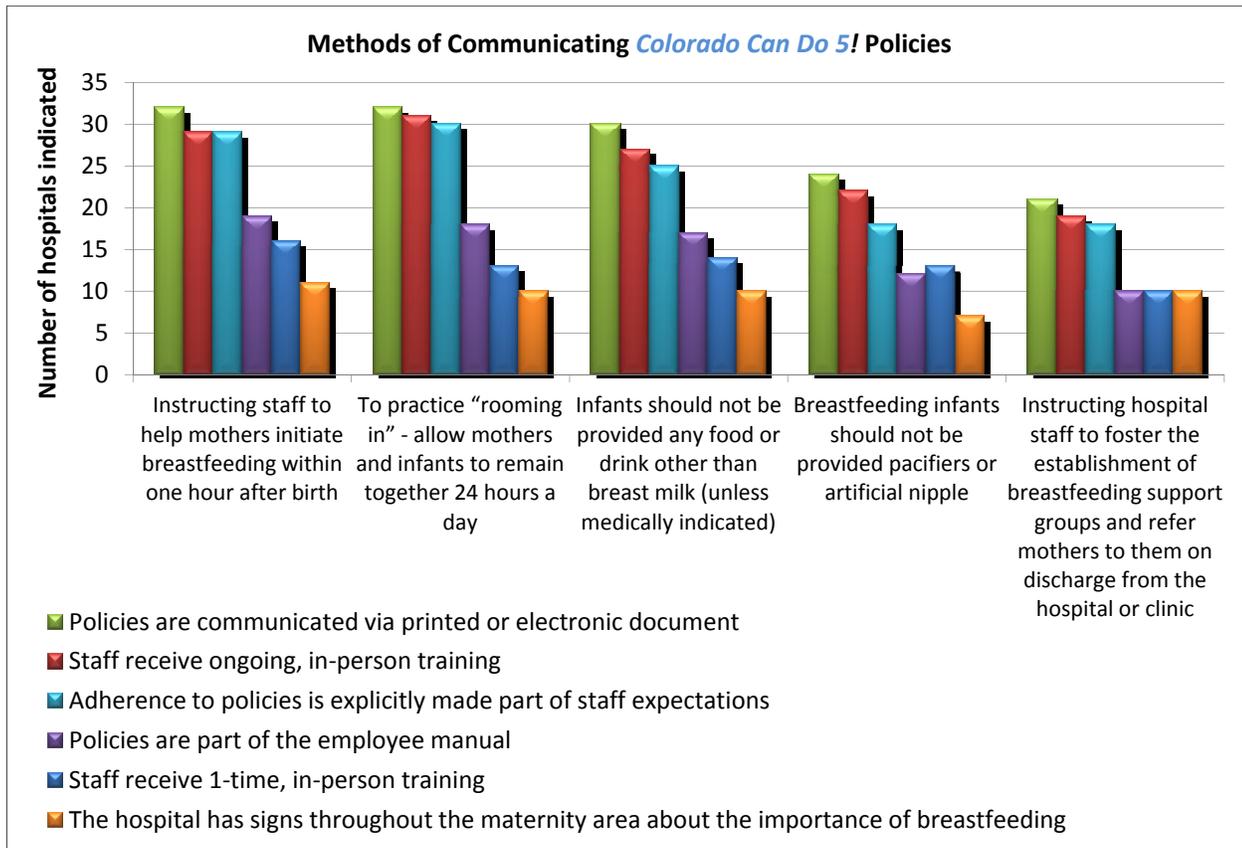
Number of Practices in Policies by Percent of Hospitals



¹ Rosenberg, K., et al. Impact of Hospital Policies on Breastfeeding Outcomes. *Breastfeeding Medicine*. June 2008, 3(2): 110-116.

² Murray, E. K., et al. (2007), Hospital Practices that Increase Breastfeeding Duration: Results from a Population-Based Study. *Birth*, 34: 202-211.

Many hospitals communicated lactation policies to staff through more than one means. The chart below reveals the majority of hospitals communicate policies using a printed or electronic document. In some hospitals adherence to policies is explicitly made part of staff expectations; however it does depend on the policy for each practice.



BARRIERS TO IMPLEMENTING PRACTICES: Hospital staffs' have further challenges to instituting breastfeeding supportive practices due to parent/family wants; needs and cultural norms; providers' knowledge, attitudes and practices; management; and health system issues. Parental desires (e.g., wanting formula, pacifiers, and maternal rest) are a significant challenge and do not support successful initiation of breastfeeding. Well-intentioned providers lacking the skill and knowledge to support breastfeeding - - together with a lack of policies and a level of competency to monitor their practice - - is a barrier to patients receiving evidence-based clinical support. Smaller hospitals have additional challenges because their staff work across several departments and community resources and support are limited.

HOSPITALS SUGGESTIONS FOR SUPPORT FROM CDPHE: More than one third of hospital staffs requested the department provide educational opportunities and training materials. Other suggestions included having the CDPHE provide resources, such as sample policies and grants, to make the Baby-Friendly Hospital Initiative *Ten Steps* attainable, and to use media to educate Colorado communities about breastfeeding and hospital practices.

NEXT STEPS: This survey provides a baseline understanding of current hospitals' policies and where Colorado must focus efforts to improve hospitals' ability to promote, protect and support breastfeeding. As a result, a Colorado Hospital Summit is being planned for September 2012 to bring hospital leaders together to provide evidence-based solutions to these barriers to implementing the *Ten Steps to Successful Breastfeeding*.