

What is Baby-Friendly?

The Baby-Friendly Hospital Initiative (BFHI) is a global program providing assistance and recognition for hospitals providing optimal evidence-based maternity care.

Baby-Friendly Designation is Widespread and Growing

In Colorado:

- 21 (out of 59) hospitals participate in the Colorado Baby-Friendly Hospital Collaborative.
- By 2020, the Collaborative predicts more than 50% of Colorado births will occur at a Baby-Friendly designated facility.

Why be Designated?

Breastfeeding is one of the most effective preventative health practices for both mothers and infants.¹ Designation ensures ongoing staff training and lasting culture change to improve health outcomes and increase patient satisfaction.

Benefits of Baby-Friendly

HQIP program
(Hospital Quality Incentive Payment)

\$90 million

was available for incentive payments for 2016/17.

- Medicaid incentive payments offset Baby-Friendly implementation costs.

Cost Savings

\$18.5 billion saved

in maternal and child health care costs annually.²

- Formula costs are overestimated by 19-40%.³ Baby-Friendly is cost-neutral after implementation.

Patient Satisfaction

90% of mothers breastfed

and 28% of live births occur at Baby-Friendly designated hospitals in Colorado.

- Leaving the hospital exclusively breastfeeding increases maternal satisfaction.

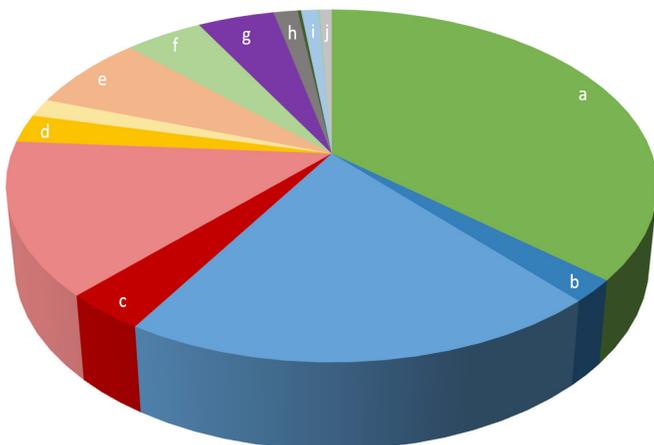
Quality Indicators

1 bottle of formula

can alter Joint Commission data.

- Improve Joint Commission Core measures of exclusive breast milk feeding.

Health Care Cost Savings of Breastfeeding (by Pediatric Disease/Death)



- Projected health care cost savings from prevention of pediatric diseases/deaths if 90% of U.S. families were able to comply with medical recommendations to breastfed exclusively for 6 months.²
- Breast milk (mother's or donor) prevents necrotizing enterocolitis (NEC), resulting in an estimated cost savings of \$198,000 per infant during the initial hospital stay.²

■ a. Sudden infant death syndrome ~36.42%	■ e. Otitis media ~7%
■ b. Necrotizing enterocolitis	■ f. Atopic dermatitis ~4.63%
■ c. Lower respiratory tract infections	■ g. Childhood obesity ~4.56%
■ Hospitalizations ~3.48%	■ h. Gastroenteritis ~1.43%
■ Deaths ~14.03%	■ i. Childhood leukemia
■ d. Childhood asthma	■ Disease ~0.2%
■ Disease ~2.59%	■ Deaths ~1.03
■ Deaths ~1.67%	■ j. Childhood type 1 diabetes
	■ Disease ~0.06%
	■ Deaths ~0.73%

Baby-Friendly lasting benefits

Get reimbursed

Participate in the Hospital Quality Incentive Payment (HQIP) program to help pay for Baby-Friendly designation.

Get support

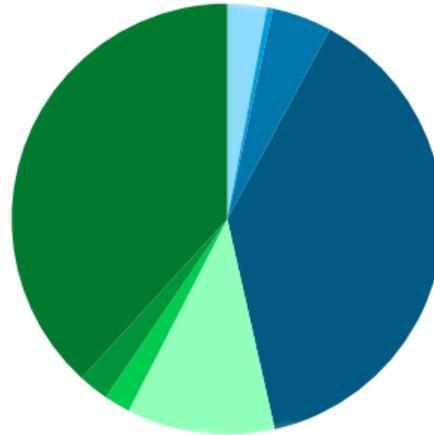
Changing attitudes and hospital culture takes time. Earning Baby-Friendly designation produces lasting results for your hospital and the patients you serve.

Triple benefits

BFHI has the potential to affect all three components of the Institute of Healthcare Improvement's Triple Aim:

1. Improving population health through breastfeeding.
2. Improving the patient experience of care.
3. Reducing costs associated with not breastfeeding.

Lifetime Health Care Cost Savings of Breastfeeding (Mother and Child)



Maternal Costs: \$9,912,143,538

- Direct Medical: \$2,054,626,897, 21%
- Indirect Medical: \$362,580,941, 4%
- Non-Medical: \$421,257,943, 4%
- Premature Death: \$7,073,677,757, 71%

Child Costs: \$8,603,033,333

- Direct Medical: \$546,930,514, 6%
- Indirect Medical: \$81,038,078, 1%
- Non-Medical: \$832,244,476, 10%
- Premature Death: \$7,142,820,265, 83%

Projected health care cost savings of maternal and pediatric diseases associated with suboptimal breastfeeding if 90% of U.S. families breastfed exclusively for 6 months (\$18.5 Billion total; 2014 U.S. dollars).²

Join the Colorado Baby-Friendly Hospital Collaborative!



Visit www.breastfeedcolorado.com for details. For more information contact Stacy Miller at stacy.miller@state.co.us or 303-692-2406.

BFHI *Ten Steps to Successful Breastfeeding* is promoted and endorsed by major health authorities in the U.S., including: American Congress of Obstetricians and Gynecologists (ACOG), American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Nurse-Midwives (ACNM), Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), Centers for Disease Control (CDC) and U.S. Surgeon General.

1. Pediatrics 2012; 129(3). 2. Matern Child Nutr 2017; 13: e12366. 3. Pediatrics 2011; 127:e989.