

Electronic monitoring on Breastfeeding in Norwegian Baby-Friendly Hospitals

Background:

In 2018 WHO and UNICEF launched The revised Implementation guidance for Baby-Friendly Hospital Initiative. According to the Ten steps / Step 1c, facilities should establish ongoing monitoring and data-management systems.

Norwegian Hospitals have not established ongoing monitoring into their quality-improvement system, but the Norwegian National Advisory Unit on Breastfeeding has performed electronic monitoring of maternity facilities since 2013.

Aim

Previous monitoring has shown a poor outcome for mothers and newborn after a caesarean delivery compared with vaginal delivery, especially on step 4 and 6. To make the hospitals have a greater focus on these mothers and babies, we performed a monitoring on this group only.

Methods:

During three months in 2020:

- mothers received a link to an electronic questionnaire, asking about breastfeeding counseling provided during their stay in the facility
- staff registered electronically breastfeeding and/or supplement given to newborns
- staff answered an electronic questionnaire on their competency on the code and how to support breastfeeding

Using survey software.

Results:

300 mothers answered the questionnaire.

693 newborns were registered.

976 staff answered the questionnaire.

WHO propose sentinel indicators for step 4 on the percentage of term infants who were put to the breast within one hour after birth, and step 6 on the percentage of infants who received only breastmilk throughout their stay at the facility.

Mother's answers:

- 61% report that babies were placed skin-to-skin with them immediately or within 5 minutes after birth
- 49% breastfed within the first hour after birth
- 44 % of babies received supplement

Staff registration:

- 57 % of babies received supplement

Conclusion:

Results are not according to Baby-Friendly target where $\geq 80\%$ should receive best practice.

Hospitals should integrate recording and monitoring in their quality-improvement systems to better comply with the 10 steps and eight key clinical practices.

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