



BREASTFEEDING PEER COUNSELOR GRANT

Performance Measure FY20

Impact Statement

- HACAP WIC and Breastfeeding Peer Counselor staff initiated a quality improvement project with the goal of improving the support given to the Mother's in our community within the first week after delivery. Historically, the women who delivered at both of the local hospitals received a Home Visit by a Registered Nurse within the first three to four days post-partum. This was no longer cost effective and both hospitals are not providing these services. There is a gap in services due to these changes. Pediatrician are scheduling newborn visits within the first week after birth.

Impact Statement (continued)

- Women often stop breastfeeding prior to their first WIC appointment after delivery. We know that breastfeeding support in the first three days after delivery has been imperative in the women's decision to continue to breastfeed. The HACAP WIC staff want to provide breastfeeding support to all women within three days of delivery. This may include scheduling their WIC appointment earlier, improving the Hospital and Eastern Iowa Women's Health Center referral process and earlier referrals to the WIC Lactation Consultant and Breastfeeding Peer Counselor.

Impact Statement (Continued)

- In order to meet this goal, we needed to address the current referral process and other discrepancies within our program. A Cause and Effect Diagram such as the Fishbone Diagram was completed after brainstorming with staff. Main causes were identified that included barriers, lack of support, breast concerns, education/training and WIC scheduling. Causes were identified and consensus was made to work on the referral process.

Quality Improvement Project

- **Aim Statement:** Between October 2019 and September 2020, HACAP WIC Breastfeeding Peer Counselor(s) will contact 90% of the women who are referred by the Hospital Staff and EIWHC within three to five days post-partum

Quality Improvement – Plan, Do, Study and Act

◦ Plan:

- The goal is to establish and preserve a partnership with the Eastern Iowa Women's Health Center (EIWHC) and Unity Point Birth Center staff to enhance the effectiveness of the WIC Breastfeeding Peer Counselor Program
- The WIC Coordinator and Breastfeeding Peer Counselor Coordinator will collaborate with Unity Point Birth Center Staff, Social Workers and Lactation Consultants to discuss current referral process

Quality Improvement – Plan, Do, Study and Act

- Do:
- Angie Munson, WIC and Breastfeeding Coordinator, attended several Birth Center Staff Meetings early this Spring to discuss the WIC Program and Breastfeeding Peer Counselor Program and referral process
- Laurie Jasper, Breastfeeding Peer Counselor Coordinator and Diana Strahan, Family and Community Health Alliance Administrator, met with the Eastern Iowa Women's Health Center to discuss our current WIC Program, Breastfeeding Peer Counselor Program and referral process
- WIC Clients leave local hospitals breastfeeding but decide to quit prior to their first WIC appointment

Quality Improvement – Plan, Do, Study and Act

◦Do:

- Contact by Hospital Nurse, Home Visit Nurse or Peer Counselor is imperative in the first week after delivery
- Goal to improve the referral process and early initiation of client contacts
- Current WIC Referral form was used (Please emails with attachments)

Quality Improvement – Plan, Do, Study and Act

- Study:
- The WIC Coordinator or Breastfeeding Peer Counselor Coordinator will develop a new referral form or update the current form to be used by Unity Point Birth Center and the Eastern Iowa Women's Health Center.
- Discuss current form and process with WIC Staff, WIC Coordinator, Breastfeeding Peer Counselors and Support Staff
- Collaborate with partners: What works, what doesn't. (Broadlawns Referral Form)

Quality Improvement – Plan, Do, Study and Act

- Act:

- Angie Munson and I looked at the current Referral Form: Does it meet everyone's needs?

- Decided not to change the form.

- Act:

- Education was needed for all WIC Staff, CPA's, Support Staff, Unity Point and EIWHC staff. Completed staff and individual meetings

Quality Improvement – Plan, Do, Study and Act

- Act:
- Specific meetings were held with Carie Davenport, Support Staff Coordinator, and Michele Lerch, Support Staff, to discuss importance of filing the Referral Forms in a timely manner not only for WIC but for initiating a Breastfeeding Contact within 3-5 days post-partum
- This was a major change
- Initially they were being sent to the Coordinator, this step was not efficient
- Michele then emailed all scanned forms to Lucy Mills, BF PC

Quality Improvement – Plan, Do, Study and Act

◦ Act:

- Lucy Mills, Breastfeeding Peer Counselor, developed a Word Excel spreadsheet to capture referrals on a weekly basis
- Lucy Mills will contact all clients to discuss their breastfeeding concerns and to make referrals to the BF PC Program as requested
- Referrals will be made to the WIC Lactation Consultant as needed

Root Cause:

- WIC Breastfeeding Mothers did not have access to the WIC Breastfeeding Peer Counselor(s) or Lactation Consultant in the first three days after delivery unless they were enrolled in the program prenatally. This happened because WIC Clients declined enrollment in the BF PC Program, declined breastfeeding support, didn't return for follow-up WIC appointments, were not referred externally, didn't understand the program or lack of education. WIC clients struggle with not only reaching out for support, but accepting it as well. They often times see us as a government agency.

Methods of evaluation:

- Lucy Mills, BF PC , received all Hospital and EIWHC referrals from Michele Lerch, Support Staff within one to two days after receiving them.
- A Word Excel Spreadsheet was completed to capture the number of referrals per week.
- We were not capturing any data from the hospitals prior to this initiative

Measurable QI Outcomes:

- We received 36 referrals starting March 30th through July 12th
- 34 Breastfeeding Clients were contacted (94%)
- 13 responded
- 6 were interested in having a BF PC (50% were all ready had a BF PC)

Future Plans:

- Continue QI Project through FY20
- Evaluate Measurable Outcomes to address if the referral process is working?
- Use My Community Care for referral process
- Meet regularly with the Social Workers, Lactation Consultants to educate all staff in the importance of making referrals to WIC prenatally and prior to discharge
- Address other Root Causes