ABSTRACT

Family-Centered Care (FCC), providing for non-separation of mother and infant at birth, has been supported by research for over 30 years. FCC provides an opportunity for the parents to get to know their infant, gain experience in performing infant care and for mother to establish a milk supply for breastfeeding. However, it can take decades to translate evidence into practice and this was true at a large academic medical center where infants were still being routinely taken to the nursery for birth. Nursing leadership recognized that this practice needed to change. The project aim was to move from traditional nursing practice to one that was evidence-based. A new nursing-care model, “Baby Meets World” (BMW), was implemented to provide for non-separation of mother and infant. Staff nurses completed a questionnaire before and after model implementation to assess their attitudes towards the model change, efficacy of the education provided and to measure nurses’ perceptions of their input into the model change. A nurse-led initiative can change traditional nursing practice to an evidence-based care model meeting best practice standards.

BACKGROUND

After delivery newborns were being taken to the nursery where they were transitioned and admitted in a systematic process. After maternal recovery mom and baby were reunited on the Postpartum floor. This process could take several hours and was not an Evidence-based Practice.

PURPOSE

The purpose of this project was to implement the Evidence-based practice of transitioning the newborn at the mother’s bedside. Thereby allowing mother and baby to stay together during the newborn transition and admission process.

METHODS

Nurse leaders led staff nurse implementation teams to oversee each aspect of model implementation and the nurse leaders actively participated in assessment, planning and evaluation of the model change. They used Six Sigma methodology to Define, Measure, Analyze, Improve and Control the outdated process and to guide the new process planning, development and implementation. Using the Six Sigma Toolbox the staff nurses developed current and future-state process maps, workflows and standards of care.

RESULTS

Nurses’ agreement with the statement, “The couplet care model provides the best possible care for families” increased from 55% (n=40) pre-intervention to 68% (n=47) post-intervention.

Nurses’ perception of their input being well received increased from 42% (n=40) to 59% (n=47) pre- and post-involvement in the project.

In January 2013, six months prior to BMW the exclusive breastfeeding rate at discharge was 27.09%. In June 2013, at the time of the implementation the exclusive breastfeeding rate was 46.67%. In December 2013, the rate climbed to 51.62%.