Implementing Maternal-Infant Skin-to-Skin Contact Following Caesarean Birth: BFHI Step 4

Mahon M¹, Joyce P², Institute of Leadership, RCSI.
¹MSc Leadership in Health Professions Education; ²Facilitator/Director of Academic Affairs, Institute of Leadership

Introduction & Background


Skin-to-skin contact is Step 4 of the Ten Steps to Successful Breastfeeding.

It is implemented through the Baby Friendly Hospital Initiative—a platform to improve maternity care practices.

It is supported by a body of research demonstrating the positive impact on the infants' health & is the social norm for infants born vaginally.¹

Aims & Objectives

**Aim:** To implement maternal/infant skin-to-skin contact following caesarean birth, and to thereby increase the organisation’s practice to the national standard of 80%

**Objectives:**

1. Increase compliance from 0% to 60% for infants born by caesarean section.
2. Increase the combined standard of infants delivered vaginally and by caesarean section to 80%-National standard.

References


Evaluation

Formative & Summative assessment.

Data analysed Jan-2011 to May 2012

Figure 2: Outcome

Organisational Impact

A high level of organisation learning was achieved. Individuals underwent difficult changes involving unlearning old ways of thinking and the redrawing of their cognitive maps—the way they perceive and make sense of the world around them.²

Through this learning the organisation has developed the ability to adapt quickly and appropriately to demands for change in the delivery of healthcare²

Conclusion

The success of this project lies in the approach taken. Learning from change was supported by encouraging initiative & risk using experiential learning as a tool.

To gain commitment of others to change, one first challenged one’s own assumptions, attitudes and mindset, to develop an understanding of the emotional and intellectual processes involved.²
Abstract

This poster presents one organisation’s journey through a planned change process after a deficit in practice standards for skin-to-skin contact was identified. This is Step 4 of the Ten Steps To Successful Breastfeeding. The Baby-Friendly Hospital Initiative aims to implement the Ten Steps into maternity care organisations. Skin-to-skin contact means “lying the naked infant prone on its mother’s bare chest” immediately following delivery¹. This practice is the social norm for infants born by vaginal delivery, but despite overwhelming evidence of the benefits, was not practiced following caesarean birth. The organisation where this change process occurred is a baby-friendly accredited organisation and has therefore committed to maintaining national standards. The HSE Change Management Model² provided a framework to guide the change process. Quantitative data collection identified just over 60% of infants born by caesarean delivery had immediate skin-to-skin contact and the overall standard reached was 83%. Qualitative data proved the benefits of changing practice to service users and providers; “I had my baby close to my skin yesterday after my section, it felt so wonderful, bottle feeding him doesn’t feel right, can I breastfeed him…” “I feel so good today, they didn’t take the baby away this time…breastfeeding is going really well…..do you remember my last baby wouldn’t feed for days… she was so unsettled and cross…” Midwives acknowledge that the challenges previously faced when supporting infants to breastfeed following caesarean delivery have been reduced “don’t they feed so well in the recovery room, we don’t have to worry about them when they come up to the ward”. Experiential learning provided the medium to safely support changes to clinical practice.
