



The key to discharge – Hospital working midwives: how can they support breastfeeding after discharge from hospital.

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short biography

midwife – lactation consultant IBCLC ; Bonheiden, Belgium ; Working at Hospital: AZ Sint-Maarten, campus Duffel; I'm working as a midwife at the section: maternity ward, neonatology, delivery-room and gynaecology. I'm working part-time and 25% of my job time I can work as a lactation consultant at the maternity ward. My special concern is the start of breastfeeding in the hospital and follow-up & support when mothers are going home.

Objective

I would like to convince all midwives and lactation consultants, working in hospitals or self-employed. Working together will bring us much further to our shared goal. That is: supporting mothers with their breastfeeding, giving self-esteem and self confidence. I hope it will go on to the next generation where breastfeeding might be the norm. Mothers and baby's will get better from our teamwork and that's what we aim for.

This paper is developed from the conviction that mothers(still) need guidance and support with their breastfeeding when they are discharged from hospital.

It is build on following phrasing:

"How can we guide mothers after discharge from hospital with the purpose to support breastfeeding in the first week at home?"

An important period for the good start of breastfeeding are the first 14 days after delivery.

This moment is also described in literature as "a critical moment" in breastfeeding.

Breastfeeding support should be a continuous care starting on maternity and continue in primary care services.

The first home visit of health care services is situated at the average of 13,4 days after delivery (in Belgium). This moment is situated in the risky period of early weaning.

The determination of this split is an important data which asks for extra attention of midwives and lactation consultants at the time mothers are discharged from hospital. It is their job to give mothers the necessary information of the follow-up in primary care services.

The objective is to work out a plan for an optimal start, follow-up and support of breastfeeding with a flowing change-over from hospital to home.



Practical workout

Following actions are developed:

1. uniform policy and protocol on maternity
2. implementation of Breastfeeding Assessment Score (BAS) and a pass- on form to primary care.
3. discharge information for mothers on paper
4. possible actions to work out in hospital
5. a reassurance checklist for mothers
6. an informative meeting between maternity and primary care workers

Conclusion

During breastfeeding in the first 14 days, it is very important to guide and support in order to extend the duration of the breastfeeding period. Hospital working midwives and lactation consultants play a very important role; they are the connection between mothers and primary care workers. The extension of the cooperation among hospitals and primary care services is a challenge. This broad-based cooperation of midwives, lactation consultant and postpartum healthcare services can become agents for supporting long term breastfeeding.