

A Quality Improvement Initiative to Improve Human Milk Feeding Intention Through the Implementation of a Prenatal Educational Toolkit

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BACKGROUND

- Human milk feeding (HMF) is recommended for the first six months of life. ⁽¹⁾
- 84.1% of babies nationwide have been breastfed at some point, while Tennessee falls behind with only 79.1% of infants ever breastfed. ^(1,2)
- Several factors contribute to this gap, including limited knowledge among healthcare providers, inadequate patient education, a lack of support for sustained feeding practices, and diminished maternal confidence. ^(1,2)
- Understanding patient preferences and providing early prenatal education can increase mothers' HMF intention, knowledge, and confidence. ^(1,2)

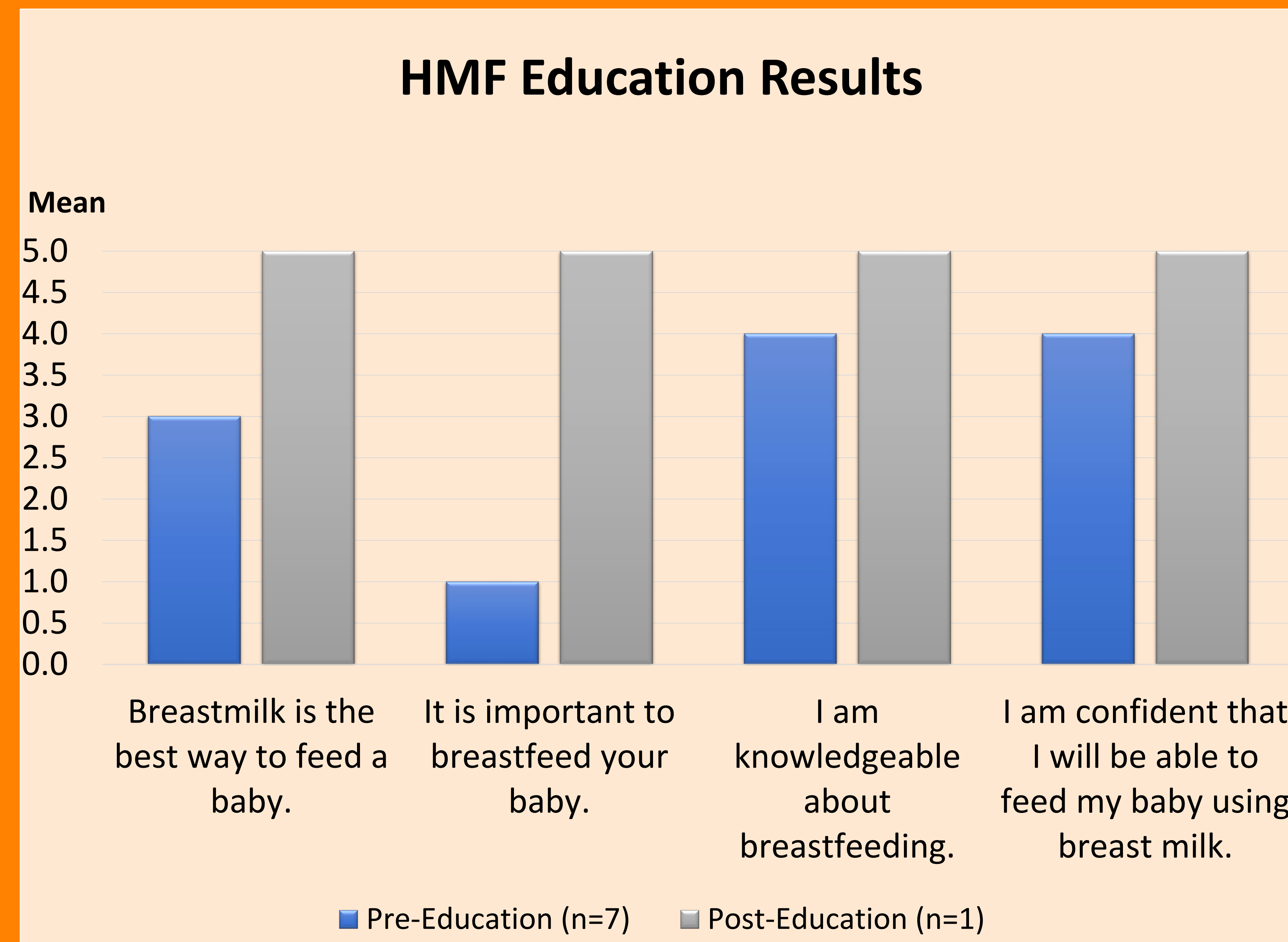
LOCAL PROBLEM

- The project site was a private practice OBGYN office in East Tennessee, with approximately 1080 deliveries yearly.
- Gaps in provider knowledge and the availability of education on HMF for patients were identified.
- Before this project, no structured prenatal education on HMF was provided.
- The project's purpose was to implement HMF education to improve intention, knowledge, and confidence regarding HMF before birth.
- The project aimed to enroll 40% of pregnant individuals planning to use HMF in five online educational videos created by BrightCourse, between 28 and 36 weeks of gestation.

METHODS

- The Evidence-Based Practice Improvement (EBPI) Model guided the implementation and evaluation of the project. ⁽⁷⁾
- Literature search and critical appraisal of relevant studies supported the implementation of prenatal education on HMF.
- The education selected was through BrightCourse, an evidence-based video-streaming education platform.
- Pre- and post-education surveys were conducted to evaluate changes in HMF intention, knowledge, and confidence.

Prenatal education improves pregnant individuals' intention, knowledge, and confidence in feeding human milk.



References

INTERVENTIONS

- At the 28-week appointment, the provider offered a survey to evaluate patients' intentions, knowledge, and confidence about HMF.
- Patients who chose to receive prenatal HMF education received a text with a link to five educational videos.
- At the 36-week appointment, those who had watched videos were asked to complete the same survey, which included evaluation questions related to BrightCourse videos.

How strongly do you agree or disagree with the following statements?					
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
Breastmilk is the best way to feed a baby.	☐	☐	☐	☐	☐
It is important to breastfeed your baby.	☐	☐	☐	☐	☐
I am knowledgeable about breastfeeding.	☐	☐	☐	☐	☐
I am confident that I will be able to feed my baby using breast milk.	☐	☐	☐	☐	☐

RESULTS

- 30% of patients (n=31) completed the initial survey and allowed BrightCourse to send educational videos, falling short of the 40% aim.
- 7 patients viewed an average of 3 videos and received the post-education survey.
- 13% (n=1) completed the evaluation survey, indicating improved intention, knowledge, and confidence regarding HMF
- 100% of patients who received access to the educational videos indicated their intention to HMF.

CONCLUSIONS

- Limitations: small sample size and poor post-survey response rate.
- During our project, prenatal education improved one patient's intention, knowledge, and confidence in HMF.
- The type, quality, and timing of the HMF education provided affect infant feeding decisions made early in pregnancy.
- Alternative strategies to HMF education are recommended.