

## **Category - Quality improvement.**

### **Human Milk Matters: Improving early maternal breast milk provision for babies born under 34 weeks gestation.**

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#### **Background -**

When babies <34 weeks gestation receive early maternal breast milk (MBM) their risk of developing necrotising enterocolitis, ventilator associated pneumonia and retinopathy of prematurity reduces. Unsurprisingly early MBM provision features in the British Association for Perinatal Medicine's Perinatal Optimisation pathway. In our tertiary neonatal unit quality improvement work around early MBM provision has been ongoing for the last year.

#### **Aim -**

85% of babies born <34 weeks gestation to receive MBM within 24 hours of birth, ideally within 6 hours.

#### **Methods -**

Following analysis of the issue, identifying key stakeholders, and baseline data collection, training sessions were provided for midwives and midwifery assistants in November 2022, with this incorporated into mandatory training from January 2023. Training covered the importance of early MBM for preterm babies and the impact of expressing within 1-2 hours of birth on long-term milk production.

#### **Results -**

In the first quarter of 2022 36% of babies <34 weeks gestation received MBM in the first 24 hours of life. Following implementation of midwifery team training this has increased, with 70% of these babies receiving MBM in the first quarter of 2023, and 64% in the last 3 months.

#### **Conclusion -**

Early MBM provision has nearly doubled since introducing a mandatory training programme for midwives. We are close to, but not yet meeting, our 85% target. Work is needed to increase engagement within the midwifery team and embed the support of early milk expression into immediate postnatal management following preterm birth. We are also working on the documentation of MBM provision, to enable us to work toward a 6 hour target.

Our next PDSA cycle plans to provide birthing people with consistent information about early milk expression and the benefits for them and their baby, focusing on those attending the preterm birth clinic or presenting with threatened preterm labour.