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## Introduction

- Ireland has the **lowest breastfeeding initiation rates in the world**
- The health benefits of breastfeeding are well established.
- The WHO (2018) states that effective breastfeeding **promotion, protection, and support** needs to occur **to improve breastfeeding rates.**

### Readiness for Change:

- National Breastfeeding Observation Assessment tool (BOAT) guideline<sup>1</sup> states PHN'S must complete a **BOAT assessment** at birth notification
- This supports identification of and appropriate referral for breastfeeding issues.
- However, a **recent BOAT audit** in Dublin North by the Author of 160 charts in 16 health centres showed a **34% compliance rate**

People & Culture Change Platform  
↑ CREATING READINESS ↑

## Change Framework



## Engagement

- **Key stakeholders:** DPHN, ADPHN's and PHN champions
- **Focus on people's needs:** Fostered a culture of trust, respect and client centeredness which are enablers of change.
- **Sustained involvement:** Author reported regularly to both the Local Infant Feeding Implementation Group and the National BOAT Guideline Review group. Regular communication to all staff
- **Existence of strong culture of learning and improvement in DNCC supported project to build on a shared purpose.**

### People's Needs Defining Change

Service Users, Families, Citizens, Communities & Staff

## DEFINE

### Aims and Objectives

**AIM** Increasing the use of **BOAT** by PHNs in Dublin North, thereby providing appropriate supports for breastfeeding mothers

### Objectives

- Improve the use of the BOAT to 70%
- Ensure that 90% of PHNs attend BOAT educational sessions
- Ensure 80% of staff indicate that they found the education valuable
- Establish 3 online Breastfeeding Support Groups in the Local Health Area, establish a weekly Lactation Consultant Clinic



## DESIGN

### Methodology, Evidence and Planning

- Used Practical Guide to Audit 2014 to audit use of BOAT Tool – findings included 35% compliance rate of tool usage
- Established a Project group; regular project meetings and communication to all staff sustained the project during Pandemic
- Co-Designed education modules with stakeholders, piloted initially in one health centre
- Used PDSA Cycles to refine Education and Clinic rollout



## DELIVER

### Discussion and Conclusion

- Ongoing pandemic highlighted need for compassionate leadership to support and influence staff engagement and project rollout
- Need for flexibility in training delivery and rollout evident due to rapidly changing environment due to Pandemic
- IT upskilling for staff involved was supported through online training
- Success celebrated by sharing project results with staff, PHN colleagues nationally, and National Breastfeeding Co-Ordinator
- Provided much needed morale boost!



## Outcomes

### Project Results

**91% Compliance Rate of use of BOAT Tool at re-audit following project rollout**

**90% of PHN'S attended training**

- 3 PHN led online support groups established, lactation consultant community clinic established

### Outcome

- Delivered increased breastfeeding support for mothers, resulting in a reduction of breastfeeding issues
- **This BOAT Audit will support the upcoming national BOAT audit**
- Project being rolled out in DNCC and other CHO'S

"Sometimes the simplest and most cost-effective interventions can have the greatest impact"

Sir Liam Donaldson

Safer Better Healthcare, and Staff & Public Value

CHANGE OUTCOMES



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Case studies: [hseand.ie/change&innovationhub](http://hseand.ie/change&innovationhub)

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**References:** HSE (2018). *Guideline on the Observation of a Breastfeed and use of the Breastfeeding Observation Tool (BOAT)*; Hanafin, S. (2020). *Exploring outcomes of public health nurse-facilitated breastfeeding support groups. Journal of Health Visiting, 8(2), 74-82. doi:10.12968/johv.2020.8.2.74*




# BREASTFEEDING OBSERVATION ASSESSMENT TOOL (BOAT)

Publication date: August 2018

Last reviewed: February 2021

(Please complete at the first visit. This resource may also be used at subsequent visits. Always use a colour version)

Mother's Name:		Baby's Name:		<b>ASSESSMENT PERFORMED BY:</b>	
Address:		Date of Birth:		Name:	
Tel:		Baby's Age:		Public Health Nurse / Registered Midwife (PHN / RM)	
Mother's Date of Birth:		Baby's Birth Weight:			
Type of Birth:		% Weight Loss:			
Verbal Consent Given:	Yes		No	Current Weight:	Date:

How to use the BOAT	GREEN BOX - Effective Breastfeeding	AMBER BOX - Suggestive of a Breastfeeding Challenge
<ul style="list-style-type: none"> <li>An eLearning training programme is available on HSEland at: <a href="http://www.hseland.ie">www.hseland.ie</a>, Module Name: Supporting Breastfeeding</li> <li>The Supporting Guideline is available at: <a href="https://www.breastfeeding.ie/Resources/Health-professional/Policy.html">https://www.breastfeeding.ie/Resources/Health-professional/Policy.html</a></li> <li>Observe the baby breastfeeding (following mother's verbal consent) and ensure correct positioning and attachment of baby to the breast.</li> <li>Complete the BOAT resource, at the first visit, by asking or observing all points in the white column on page 2.</li> <li>Effective breastfeeding is indicated if all boxes in the green column on page 2 are ticked. Please then go to Green Box (opposite).</li> <li>If the amber column on page 2 has boxes ticked, it suggests a challenge with breastfeeding. Please then go to Amber Box (opposite).</li> </ul>	<ul style="list-style-type: none"> <li>Continue breastfeeding with PHN / RM support.</li> <li>Encourage attendance at local breastfeeding support groups.</li> <li>The following is the link to support groups facilitated by the HSE and voluntary breastfeeding groups: <a href="https://www.breastfeeding.ie/Support-search/">https://www.breastfeeding.ie/Support-search/</a></li> </ul> 	<ul style="list-style-type: none"> <li>If there is an underlying medical issue for mother or baby the PHN / RM refers to the GP.</li> <li>If there is a breastfeeding challenge the PHN / RM develops a care plan, takes corrective action, and refers to breastfeeding support group.</li> <li>The PHN / RM revisits, and repeats the BOAT based on clinical judgement.</li> <li>The PHN / RM continues corrective action until the breastfeeding challenge resolves.</li> <li>If the challenge is not resolved the PHN / RM consults with or refers to a specialist breastfeeding professional (IBCLC) &amp; includes BOAT.</li> </ul>

Day	Wet Nappies	Dirty Nappies (Mohrbacher and Kendall Tackett, 2010, p.92)
1	1 wet nappy + (over 24 hours)	1 stool (black)+
2	2 wet nappies +	2 stools (black)+
3	3 wet nappies +	3 stools (black or greenish)+
4	4 wet nappies +	3 - 4 stools (greenish or yellowish)+
5	5 wet nappies +	Stools should turn yellow
6 days - 6 weeks	6 wet nappies + (pale, yellow or clear urine)	3 - 8 stools + (yellow, seedy, runny to loose) daily
6 weeks - 6 months		3 - 5 stools + (daily but may skip days). (Yellow, soft may thicken over time because of milk compositional changes) (Wambach and Riordan, 2016, p.295)

**Percentage Weight Loss Calculation:**  $\text{Weight Loss} \div \text{Birth Weight} \times 100 = \% \text{ Weight Loss}$

• **Example:**  $\text{Weight Loss} = 226\text{g}$ .  $\text{Birth Weight} = 3500\text{g}$ .  $226 \div 3500 \times 100 = 6.45\% \text{ Weight Loss}$

What to Observe / Ask About	Green Column - Answer indicating Effective Breastfeeding	Amber Column - Answer Suggestive of a Breastfeeding Challenge
<b>Mother's name:</b>	Mother looks healthy.	Mother looks ill or unwell.
<b>Baby's name:</b>	Mother is relaxed and comfortable.	Mother looks tense or uncomfortable.
	There is good eye contact between mother and baby.	There is no eye contact between mother and baby.
<b>Baby's Wet Nappies</b>	Refer to wet nappies section page 1.	Refer to wet nappies section page 1.
<b>Appearance and Frequency of Baby's Stools</b>	Refer to dirty nappies section page 1.	Refer to dirty nappies section page 1.
<b>Baby's Colour, Alertness and Tone</b>	Baby may have evidence of normal physiological jaundice; Baby is alert; Baby has good tone.	Baby's jaundice is worsening or not improving; Baby is lethargic; not waking to feed; Baby has poor tone.
<b>Weight of Baby (following initial post birth loss)</b>	Baby's weight loss is <10% of birth weight. (To record % weight loss see percentage weight loss calculation section page 1). It is expected that babies will regain their birth weight by day 14.	Baby's weight loss is >10% of birth weight. (To record % weight loss see percentage weight loss calculation section page 1). Birth weight is not regained by day 14.
<b>Number of Breastfeeds in the last 24 hours</b>	Baby breastfeeds on demand, or is fed responsively according to early feeding cues, with at least 8-12 feeds in a 24 hour period.	Baby had fewer than 8 breastfeeds in the last 24 hour period.
<b>Baby's behaviour during the Breastfeed</b>	Baby is generally relaxed and calm.	The baby is unsettled during the breastfeed, or refuses to breastfeed.
<b>Sucking pattern during the Breastfeed</b>	Initial rapid sucks changing to slower sucks with pauses and audible regular soft swallowing (may be less audible until milk comes in).	No change in sucking pattern, presence of noisy feeding (e.g. clicking).
<b>Type of Breastfeed</b>	Baby feeds actively from first breast until satisfied.	Baby is unsatisfied despite regular breastfeeds.
<b>Offer of Second Breast</b>	Second breast offered as recommended when establishing milk supply. Baby feeds from second breast or not, according to appetite.	Mother restricts the baby to one breast per feed.
<b>End of the Breastfeed</b>	Baby lets go spontaneously, or does so when breast is gently lifted.	Baby does not release the breast spontaneously, Mother removes the baby.
<b>Baby's Behaviour after a Breastfeed</b>	Baby is content after most feeds.	Baby is unsettled after breastfeeding.
<b>Shape of Nipples at the end of the Breastfeed</b>	The nipples are rounded similar to when the breastfeed began or the nipples may be slightly elongated.	Nipples are misshapen or pinched at the end of the breastfeed.
<b>Mother's report on her Nipples and Breasts</b>	Nipples and breasts are comfortable.	Nipples are sore or damaged, breasts are uncomfortable.
<b>Observation of the Mother's Nipples and Breasts</b>	Nipples are intact. Breasts are comfortable with no redness, lumps or areas of tenderness.	Nipples may be infected, have symptoms of thrush or vasospasm. Mother's breasts may be engorged or have signs of mastitis. Yes (state which).
<b>Use of Dummy, Nipple Shields / Formula?</b>	None used.	Yes (state which) Ask why: