

Rooming in Are you really?

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Step 7

- Practice "rooming in" - *allow mothers and infants to remain together 24 hours a day.*
- Yes 24 hours
- Any exceptions?



What does BF USA say about Step 7?

"The facility should provide rooming-in 24 hours a day as the standard for mother-baby care for healthy, full-term infants, regardless of feeding choice."

Rooming in

- Some stuff out there about "23/24 hours"
- This is not very helpful
- A baby could be out 2 hours for a serious medical issue/procedure - this is OK
- A baby could be out 15 mins for a hearing screen; this is not OK

Rooming in - when should they stay in?



- Hearing screen
- Pediatric exams
- Routine blood draws/heel sticks
- Bath
- Night-time
- = All routine care

Rooming in

When is it ok not to?

- If a baby has to have a procedure (Circ; spinal etc)
- Car seat test (!)
- Mom requests it, is educated, consent documented
- A safety issue (mom real sick, no one else there, etc)



Strange goings on....

- Shouldn't *no nursery* mean automatic rooming in?
- Shouldn't LDRPs mean rooming in?
- Low volume/rooming not really related either.....

Prenatal preparation

- Baby-Friendly prenatal care includes discussion on rooming in
- BF USA assessors will ask prenatal patients to tell them about rooming in and what it means
- First - is anyone mentioning this at all?
- If yes...it's all in the presentation....

R O O M I N G I N

WHAT *Happens* IN THE ROOM... STAYS IN THE ROOM

- *Decreases Baby's Stress

- *Allows Baby to Breastfeed When Hungry

- *Safer for Baby



- *Allows Mother to Learn Feeding Cues and Behavior

- *Mother Establishes and Maintains Good Milk Supply

- *Decreases Mother's Stress

- *Better Quality Sleep

How to talk about it prenatally

- It's your baby - no one is allowed to take the baby out of the room without your permission
- Not....Beware! They are closing the nursery at hospital XXX



Is mom the problem?

- "She wants rest at night"
- "She doesn't want to see tests/heelsticks"
- "She wants to send baby to nursery"



Moms and rooming in

- Who is really asking about the nursery?
 - Sometimes mom
 - Sometimes, the staff....
- If it's mom
 - Educate
 - Document education in the medical record

Moms and rooming in

- If 1 mom does this...fine
- If ALL moms do it, hmmmm
- Sometimes can be local "culture"

Staff and rooming in

- If...we take babies back to the nursery for our convenience, then it's a double standard to tell mom she can't send the baby there for her 'convenience'
- We need to show our commitment to this process, so mom actually experiences the hospital's intent to practice best care

Clinicians and rooming in

- May really believe mom will sleep better
 - Evidence does not support this
- Comfort level doing tests in room?
- Comfort level talking to patients?
- Practical issues

Why 10 minutes matters

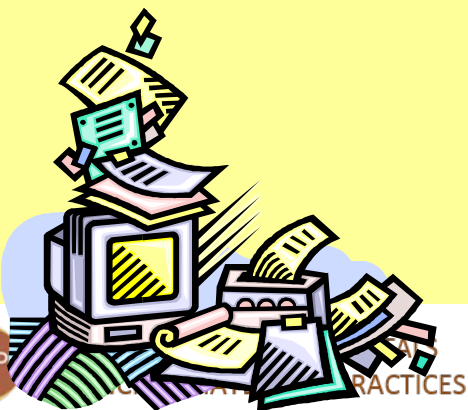
- We are talking a culture change
- If a dr does exams in the nursery
 - A nurse might then do bath in nursery
 - A tech might do hearing screen in nursery
 - Someone will do newborn heelstick/screen in nursery.....etc



Documentation



- Rooming in: the "norm"
- Each time baby leaves room: Document!
- When baby comes back: Document!
- If baby goes for a non medical reason, Document - maternal education AND times in and out





Man, that's a lot of documentation....

.....maybe it would just be easier if we left them in the room, then we would have no need to document.....



Documentation

- For example
 - 10am - baby left room for hearing screen
 - 10:15 - baby came back
- Note - this is NOT acceptable REASON, but at least the documentation is right!

Documentation

- For example
 - Mother requested baby go to nursery for the night
 - Mother was educated on benefits of rooming in and exclusive breastfeeding
 - Mother insisted she needed 4 hours of sleep with no baby in the room
- This is ok as long as it's documented and backed up by maternal report
- (And, as long as it's not many women...)
- Pass rate is 80%

Stages of change

- ★ Equilibrium – we're here, and we're happy
- ★ Denial – those breastfeeding people aren't really there
- ★ Anger – darn it they *are* there and they're not going away
- ★ Bargaining – how about we only keep babies in the nursery for 3 hours instead of 4?

Stages of change

- ★ Chaos - what the heck is going on?
- ★ Depression - we're done for
- ★ Resignation - *what* are we supposed to do?
- ★ Openness - I wasn't really listening, can you say it again?
- ★ Readiness - I guess I can try
- ★ Re emergence - Hmm. Kind of cool. I might even be a better.....

In summary....

- Rooming in really does mean rooming in
 - If 50% of your moms/babies room in ALL THE TIME, your rooming in rate is 50%
 - If 80% of your moms/babies room in during the day, and not at night, your rooming in rate is 0%
- You will meet a lot of resistance over this step
- Take it one activity at a time, be consistent, and HANG IN THERE, it really can happen.....