

## QI Abstract

**BACKGROUND:** Breastfeeding mothers of hospitalized infants are vulnerable to gaps in their own nutritional support, which can be detrimental to the growth, development, and overall health of pediatric patients. Our hospital provides meals, “lactation trays,” to mothers breastfeeding their infants. However an order for this tray must be placed. We noted a significant delay in a tray delivery to one mother and sought out data on how often this occurs and how to make improvements for breastfeeding mothers of infants on the Pediatric Hospital Medicine service.

### **METHODS:**

Our study utilized the Plan Do Study Act method of quality improvement. Baseline data from September 2019 to March 2021, including demographics, was obtained looking at the time difference between admission orders and lactation tray order. If the time difference was <2 hrs, we scored this as a “yes.” If the time was  $\geq 2$  hr or not ordered at all, we scored this as a “no.” Data continued to be collected on a monthly basis. Our SMART aim: By December 2021, 75% of lactation trays for breastfeeding mothers on PHM teams will be ordered in <2 hrs from admission.

**INTERVENTIONS:** Interviews were conducted with members of hospital staff involved in admission, bedside care, and lactation consultation. A process map was developed to guide the team for interventions. Interventions to date: education to resident physicians regarding the project (March 2021); modification to infant diet order set (June 2021); education to resident physicians regarding order set changes (July 2021).

**RESULTS:** Baseline data showed 45% of lactation trays were ordered in <2 hrs from admission. Demographic data showed no differences between the 2 groups with the exception of time of day (day versus night) with more trays being ordered in < 2hrs during the day compared to night ( $p < 0.01$ ). Nurses ordered 63% of trays and physicians ordered 36% of trays. Following interventions to date, the % of trays ordered in <2 hrs has improved to an average of 70% with 76% of trays being ordered by physicians and 15% of trays being ordered by nurses. See control chart.

**CONCLUSIONS:** This project is ongoing, but the improvement shown thus far is promising for systemic change that will be sustainable. We are optimistic based on our current trend that we will succeed in our SMART aim.