Rooming in
Are you really?

Anne Merewood PhD MPH IBCLC
Project Director: CHAMPS
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....
ROOMING IN

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 – noone 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”
Who is really asking about the nursery?
- Sometimes mom
- Sometimes, the staff....

If it’s mom
- Educate
- Document education in the medical record
- If 1 mom does this...fine
- If ALL moms do it, hmmm
- 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!
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.....