

Materials/Methods: We assessed baseline breastfeeding knowledge and skills through a questionnaire and assessment of our pediatric providers. We collected baseline data from 4 clinics with differing demographics regarding infant diets in the first 6 months of life and potential barriers to breastfeeding. Data collected included exclusive breastfeeding, mixed feeding and exclusive formula feeding in the first week of life. We designed and implemented a breastfeeding champion program. We recruited a pediatric provider and a support staff from each site to volunteer as the breastfeeding champion. Each champion completed a 4-week self-directed curriculum that included the Wellstart® modules, online videos, and a 1.5-hour training workshop.

Results: Between August 2016–July 2017, 85 caregivers (69% response rate) completed the questionnaire/assessment. 48 (56%) scored $\geq 80\%$ on a basic knowledge assessment. 28 (33%) caregivers indicated never having counseled an expectant or newly delivered mother about feeding choices. The mean confidence in addressing parental concerns regarding breastfeeding and managing common problems were 3.5 and 3.2, respectively, on a 5-point Likert scale (5-very confident; 1-not at all confident). Data on 1029 infant-mother pair diets from 4 sites revealed exclusive formula feeding rates of 19–24% and exclusive breastfeeding rates of 4–18%. Higher Medicaid population sites correlated with lower breastfeeding rates. Barriers to breastfeeding included nipple/breast pain and latching issues.

Conclusions: Breastfeeding knowledge and skills among pediatric caregivers is suboptimal. Rates of exclusive breastfeeding at our sites are low. Implementation of a program aimed at increasing caregiver knowledge, skills and confidence regarding breastfeeding will provide an opportunity to improve adherence to exclusive breastfeeding of infants. We will collect data regarding infant diets at the same clinics in 2019 to assess the impact of the breastfeeding champion program.

62. COMPREHENSIVE VALIDATION OF THE LIQUIDGOLDCONCEPT LACTATION SIMULATION MODELS BY BREASTFEEDING MEDICINE EXPERTS

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Category: Medical Education

Background: Globally, simulation-based training is an integral component of physician and nursing education. Current breast simulators are not realistic and cannot provide comprehensive lactation training. LiquidGoldConcept (LGC) developed the Lactation Simulation Models (LSMs) to teach health students and providers how to manage common breastfeeding issues. In 2017, these LSMs were evaluated by midwifery students and OBGYN and family medicine residents at the University of Michigan. However, until this study, the LSMs have not been systematically validated by breastfeeding medicine experts.

Objective(s): To evaluate the clinical relevance and realism of the look, feel, and features of the LGC LSMs.

Materials/Methods: Study participants will be attending the Advanced Breastfeeding Medicine Clinical Case Symposium led by the MilkMob in July 2018. Participants will answer questions about their breastfeeding and breast simulator experiences. They

will then perform a breast exam using the LSMs and document their findings on a line-drawing of breasts. Finally, participants will use the LSMs to perform various breastfeeding techniques and evaluate their look, feel, and realism using a Likert scale (1–7). The Student t test will be used to compare the LSM look, feel, and realism scores. The Pearson correlation will be used to test relationships between previous breastfeeding experience and realism scores. ImageJ software will be used to quantify and compare the participant drawings of features to the true locations and sizes of pathologies on the LSM to verify manufacturing intent.

Results: Based on previous studies with UMichigan students and residents, we expect that the LSMs will receive an average score of at least 6/7 for look and feel of breast tissue. We expect that the performance of breastfeeding techniques and superficial and deep pathologies will receive an average score of at least a 5/7, with qualitative feedback on strategies to improve their presentation on different skin tones.

Conclusions: Validation is an important step in the development of novel curricular materials. This is the first time that breastfeeding medicine experts will systematically evaluate the LiquidGoldConcept Lactation Simulation Models to determine the realism of their look, feel, and utility as a hands-on education tool for comprehensive breastfeeding management.

63. BREASTFEEDING TRAINING OF HOSPITAL STAFF IN THE UNITED STATES: A NATIONWIDE SURVEY OF “STEP 2” IMPLEMENTATION IN BABY-FRIENDLY HOSPITALS

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Background: Existing research on US hospital staff breastfeeding education reveals that current training methods are not standardized and rarely effective. The WHO’s recent update to the “Ten Steps to Successful Breastfeeding,” the cornerstone of the Baby-Friendly-Hospital Initiative, reinforced the importance of hospital staff training to ensure sufficient knowledge and skills to support breastfeeding mothers (Step 2). Currently, the impact of hospital training on staff knowledge and skills and patient breastfeeding duration is unclear. To our knowledge, this will be the first systematic survey of US Baby-Friendly (BF) hospitals to evaluate in-service breastfeeding education.

Objective(s): To define US Baby-Friendly hospital breastfeeding curricula and tools used for staff training.

Materials/Methods: In June 2018, investigators will contact all 500 BF hospitals to identify potential study participants. At minimum, 10 facilities in each of the five US regions will be recruited into a convenience sample of at least 50 hospitals. Basic facility characteristics including number of beds, funding sources, and maternal/child health services will be compiled through online sources. In July and August, representatives from each facility’s breastfeeding education program will be contacted to obtain consent and complete surveys via phone or email. Data collection will be completed in August and preliminary results will be available in October 2018. The survey will consist of three sections: 1) Impetus for pursuing Baby-Friendly designation 2) Breastfeeding curriculum details such as participants, educators, and hands-on versus passive learning modalities