Patient Satisfaction and Breastfeeding Rates Improve After Hospital Trains Maternal-Child Nurses in Shared Decision Making

Success Story Identifier 2015-01
Topic(s) Shared Decision Making, SHARE Approach, Evidence-Based Care, Patient Care
Geographic Location Winthrop University Hospital, Mineola, NY
Implementer Winthrop University Hospital
Date of Interview December 22, 2015
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January 2016

When nurses expressed an interest in learning how to better discuss breastfeeding with patients, educators at Winthrop University Hospital saw an opportunity to put shared decision making into practice. The Long Island teaching hospital had earned the World Health Organization’s “Baby Friendly” designation in December 2014 for its commitment to achieving optimal infant feeding outcomes and mother-baby bonding.

But in early 2015, Winthrop saw a dip in its patient satisfaction scores and rates of exclusive breastfeeding of newborns. In response, Jared Kutzin, director of the hospital’s simulation center, teamed up with clinical lactation educator, Karen Hylton-McGuire, to hold a simulation training grounded in shared decision making principles for nurses.

As Kutzin explained, “There is a link between breastfeeding rates and patient satisfaction, but there is also a strong link between shared decision making and patient satisfaction. So a shared decision making training on breastfeeding seemed fitting to respond to both the nurses’ desire to have more information on how to engage their patients and the hospital’s overall goal to achieve high patient satisfaction.”

Simulation Training Using the SHARE Approach

Together Kutzin and Hylton-McGuire planned a simulation training where maternal-child health nurses would engage in role-playing to practice shared decision making. To develop the training, they used the Agency for Healthcare Research and Quality (AHRQ) SHARE Approach resources provided on the AHRQ Web site and resources from another patient engagement initiative called RELATE™.

They tapped a crew of standardized patients (SPs) associated with their hospital’s simulation center to portray patients making decisions about breastfeeding. Standardized patients were assigned scenarios reflecting real-life situations involving choices about breastfeeding.

Understanding that physicians are much more accustomed to role-playing activities than nurses in their institution, Kutzin and Hylton-McGuire assured nurses in advance of the simulation exercise that they use patient engagement principles in their jobs on an everyday basis and that the SHARE Approach model simply offered more structure and vocabulary for what they already do. The 142 participants received a mini training brief before the role-play to review the basics of shared decision making and the five key steps outlined in the SHARE Approach to shared decision making.
Each nurse took part in a scenario with a standardized patient and subsequently received feedback from the actor portraying the patient. In addition, Kutzin and Hylton-McGuire assessed the nurses and pointed out opportunities for improvement. “The role of simulation training is to be able to reflect back on what you did and improve, prior to engaging in real-life scenarios. After leaving the training the participating nurses were expected to implement elements of shared decision making into their own practice,” Kutzin stated.

**Rating the Training**

Asoked post-training to evaluate their experience, nurses rated the training a 5.3 on a 6-point scale. Participants reported the training helped improve their:

- Education techniques on newborn feeding
- Communication skills
- Patient interactions

Following the training, the hospital’s patient satisfaction scores (assessed via their quarterly Hospital Consumer Assessment of Healthcare Providers and Systems [HCAHPS] Survey data) and rates of exclusive breastfeeding both improved, with exclusive breastfeeding rates reaching an all-time high.

Encouraged by their success, Kutzin and Hylton-McGuire went on to coordinate with AHRQ to host a March 2016 SHARE workshop for Winthrop.

**SHARE Approach**

The SHARE Approach is a five-step process for implementing shared decision making, which offers physicians and other health care professionals the training and tools to help patients compare the potential benefit, harm, and risk of various treatment options for their conditions through meaningful dialogue about what matters most to the patient. The five steps are:

1. **Seek** your patient’s participation.
2. **Help** your patient explore & compare treatment options.
3. **Assess** your patient’s values and preferences.
4. **Reach** a decision with your patient.
5. **Evaluate** your patient’s decision.
About the Educators

Jared Kutzin holds a doctorate in nursing as well as advanced degrees in medical education, public health, and health policy and management. With a nursing background in the emergency setting, Kutzin has been conducting simulation-based training for the last 10 years, including the past 3 years at Winthrop University Hospital.

Karen Hylton-McGuire holds a masters of science in nursing education and is a Ph.D. candidate. She has been practicing nursing for 36 years, with a background in neonatal intensive care and lactation. A 13-year employee and clinical lactation educator at Winthrop, she is responsible for breastfeeding and Baby Friendly education, which includes bottle feeding and formula feeding, throughout the facility.

Kutzin and Hylton-McGuire were selected as presenters at the 2016 International Meeting on Simulation in Healthcare (IMSH) held in San Diego in January, 2016.