Mother’s Own Milk (MOM) Initiative

**Project Aim**

Within 2 years of project start, ≥50% of VLBW infants admitted to the NICU receive ≥50% MOM at initial disposition

**Primary Drivers**

**Intent**
- Mother intends to provide MOM

**Establishing Supply**
- MOM pumped volume ≥500 ml/day at 7, 14, & 28

**Maintaining Supply**
- ≥50% of feeding volume comprised of MOM at day 7, 14, 28 & initial disposition

**Transition to Breast**
- Nutritive breastfeeding session within 7 days of initial disposition

**Secondary Drivers**

- Documentation of informed decision to provide MOM
- Hospital grade pump available at maternal discharge
- Lactation assessment by 24 hours of admit to NICU
- First pumping by infant’s 6th hour of life
- MOM available by HOL 72
- Non-nutritive breastfeeding documented
- Skin to Skin by day of life 10

**Recommended Key Practices**

1. Process to provide maternal education and advocate for mother’s own milk
2. Documentation of informed decision to provide mother’s own milk
3. Standardized process for lactation consultations, and assessment by 24 hours of NICU admission
4. Determination of who is responsible and continuously available to initiate and assist with ongoing pumping
5. Secure sufficient number of pumps and ensure access in-house and at discharge
6. Provide breastfeeding education and measure competencies for all staff
7. Maternal education on hand expression, hands-on pumping, colostrum collection, etc.
8. Ensure appropriate supplies are available to facilitate breastfeeding and provision of breast milk
9. Process to monitor milk supply
10. Standardized guidelines (for skin-to-skin, test weights, non-nutritive breastfeeding, etc.)

**Note:** Excludes where MOM is contraindicated.