



Time to first expression

What is time to first expression?

The time between delivery and a mother's first pumping session.

For healthy term infants who have normal births the first breastfeed should occur within the first hour.

The focus of this measure is early pumping, within 3 hours of delivery. Reasons for any delay (>3 hours) should be documented.

Why is time to first expression important?

Early breast stimulation (feeding or pumping) after birth has significant impact on future milk supply and subsequent feeding outcomes.²⁻⁷

Studies highlight that NICU mothers who initiate pumping within 3 hours after birth significantly reduce the time to secretory activation (milk 'coming in') and have higher daily and cumulative milk volumes over time.³⁻⁶ Mothers are also more likely to be pumping at 6 weeks and when infants are discharged from NICU.³⁻⁶

How to implement?

Develop/revise milk expression protocols that:

support mothers whose infants cannot breastfeed in the first hours or have a poor, ineffective breastfeed to commence pump expression within 3 hours of birth recommend to double pump with a hospital-grade pump endorse the use of research-based initiation technology	ensure mothers are taught and assisted to: use breast massage during pumping use hand expression after pumping in this early phase provide easy access to pumps, personal pump kits and collection containers in all relevant maternity and nursing wards to expedite timely milk expression	 support regular staff education on the importance of the milk production journey address potential changes in staffing strategies which may be necessary to overcome barriers.¹

How to audit?

Strategies to measure best practice include:

- Hospital protocols detailing expression within 3 hours of birth
- Recording time to first expression after birth
- Tracking percentage of mothers expressing within 3 hours of birth and analysing reasons for delay (> 3 hours)

Auditing records on a monthly basis:

- Highlights recent progress and can enhance motivation within the organisation to continue with quality improvement measures.
- Shows where changes are still required and allows for timely implementation of further education to staff for continuous improvements in clinical practice.
- Allows barriers to be identified and addressed.