“Unbundling” the Challenges of Becoming Baby-Friendly

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BABY-FRIENDLY INITIATIVE STRATEGY ONTARIO

TORONTO EAST GENERAL HOSPITAL

Provincial Council for Maternal and Child Health

best start meilleur départ

by/par health nexus santé

Breastfeeding initiation rate in Ontario = 87%
Exclusive breastfeeding at discharge from hospital = 58%
Only 33.3% of women in Ontario breastfeed exclusively for 6 months or longer



Learning Goals

* Describe the potential paths to a successful BFI journey.
* Review common challenges associated with implementing BFI.
* Discuss and analyze issues and explore possible enablers.

Getting to Know You!

* What type of organization do you work at?
  * CHC?
  * Family Health Team?
  * Aboriginal Health Access Centre?
  * NP-Led Clinic?
  * Other?



* How many of you have taken any steps towards becoming Baby-Friendly?

What is the Baby-Friendly Initiative?

Global Strategy to set minimum standards for maternity services to **promote**, **protect**, and **support** breastfeeding



Adopting evidence-based best practices such as:

- Promoting skin-to-skin contact
- Mother-baby dyad care
- Supporting and promoting exclusive breastfeeding
- Supplementing only when medically necessary

Why Become Baby-Friendly?

Evidence proves…

* Value of exclusive breastfeeding for infant development and maternal and infant health
* Value of BFI to enhancing breastfeeding support
* Value of ongoing health care provider support for breastfeeding success

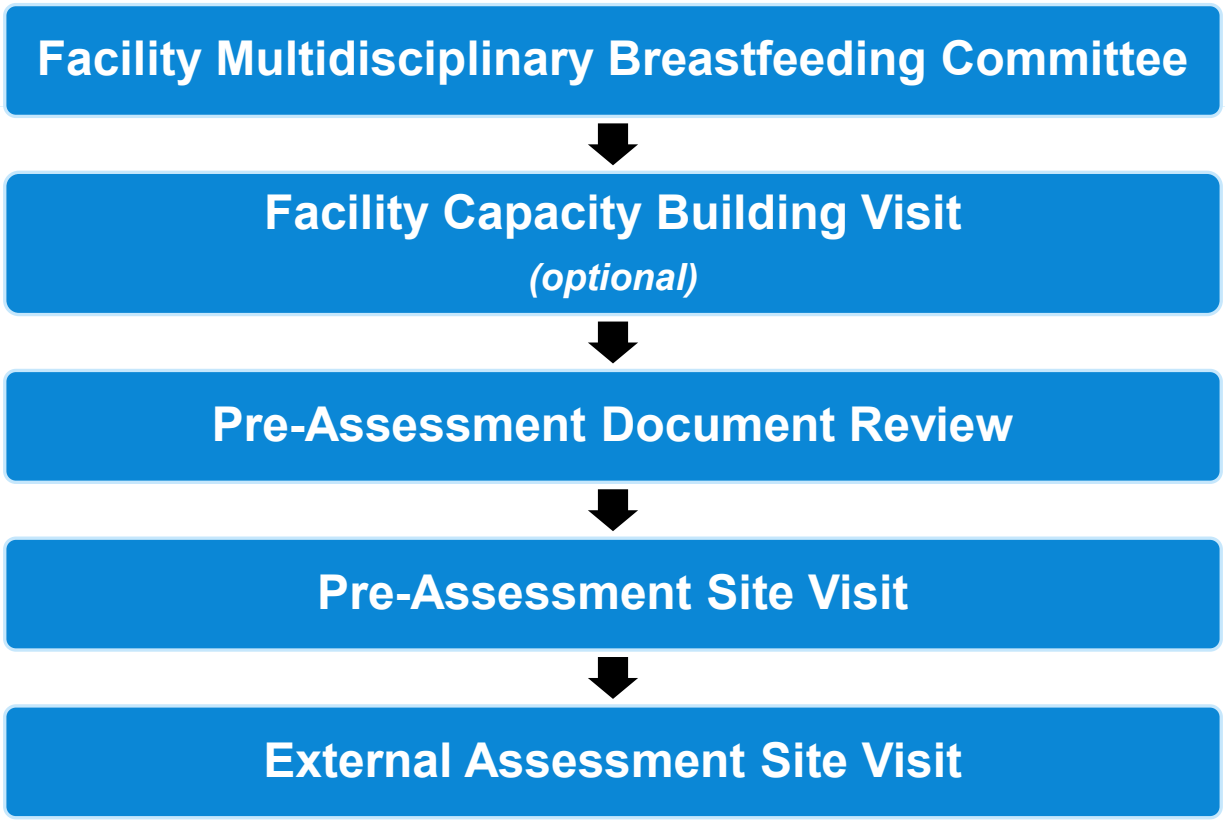


Guiding Principles of the BFI

* Inclusive of all infants regardless of how they are fed
* Promotes evidence-based best practice
* Supports informed decision making
* Encourages consistency and collaboration across the continuum of care
* Empowers and encourages public participation



Steps to Becoming Baby-Friendly



Many Paths

* Becoming Baby-Friendly
* Becoming BFI Designated



* Supporting breastfeeding in the community

Discussion

In your experience, what have been the major barriers to BFI implementation?

Other Common Challenges

1. Creating Buy-In

* Leadership support
* Staff buy-in
* Physician engagement
* Relevance to non-health service departments

2. Lack of Time and Resources Data Collection

3. BFI and Supporting the Formula Feeding Family

4. WHO Code (formula marketing and promotion)

5. Lack of Time and Resources

Complex Change

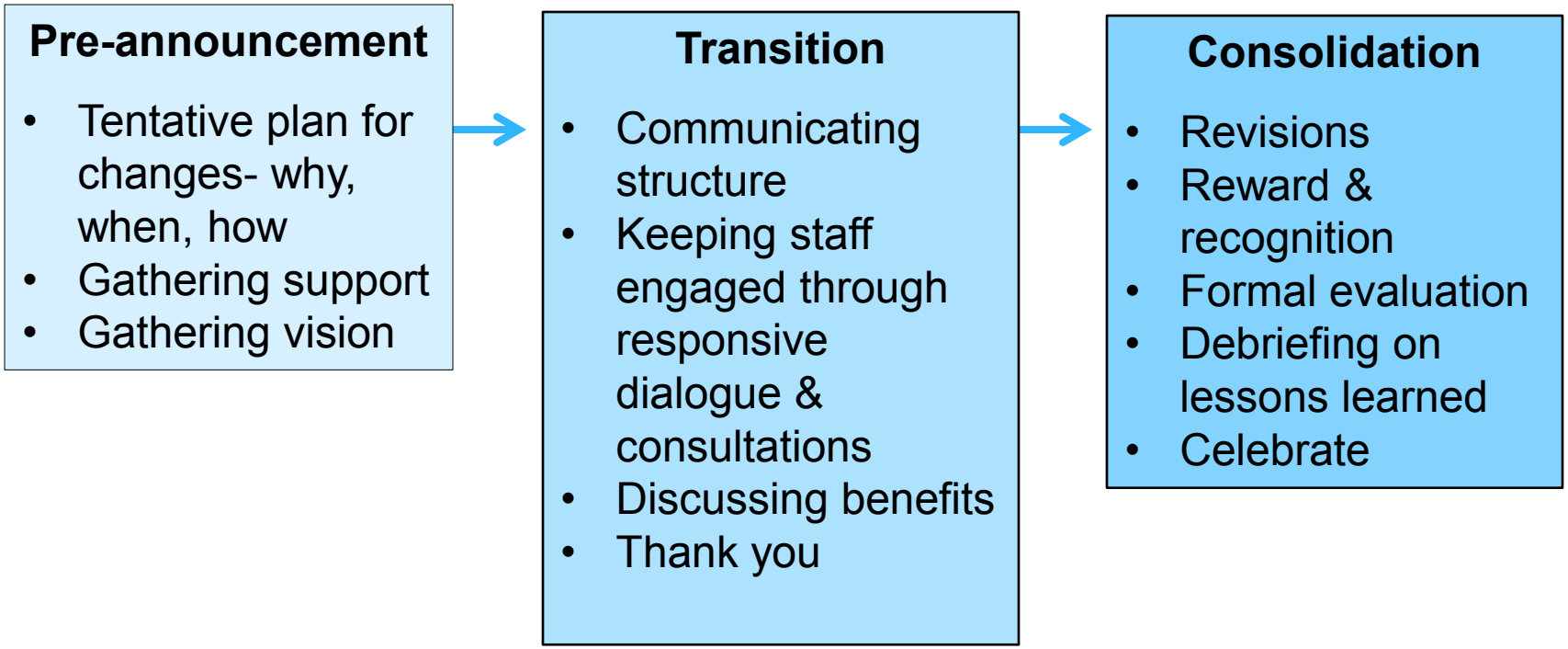


Why is BFI Implementation Complex?

* Multiple steps and practice changes to implement
* Varying knowledge among practitioners
* Multiple care providers influence decisions and success
* Large amount of research
* Personal and cultural belief systems and experiences influence practice advice
* Myths and misconceptions about BFI

Implementing Complex Change

* Involve people in shaping the change…listen and learn from them
* Vary your approach to match the phases of change



Johnson, H.H. & Freidan, A.J. (1986)

Implementing Complex Change

* Transformational change occurs at individual, unit and program levels...need to address all of these
* Balance planning, structure and a focus on an aspirational vision with managing the human side of change
* Prepare staff and physicians for change…ensure vision, skills, incentives, resources, and an action plan are all in place
* Foster curiosity, learning, openness to change and a “can do” attitude to promote creativity and innovation

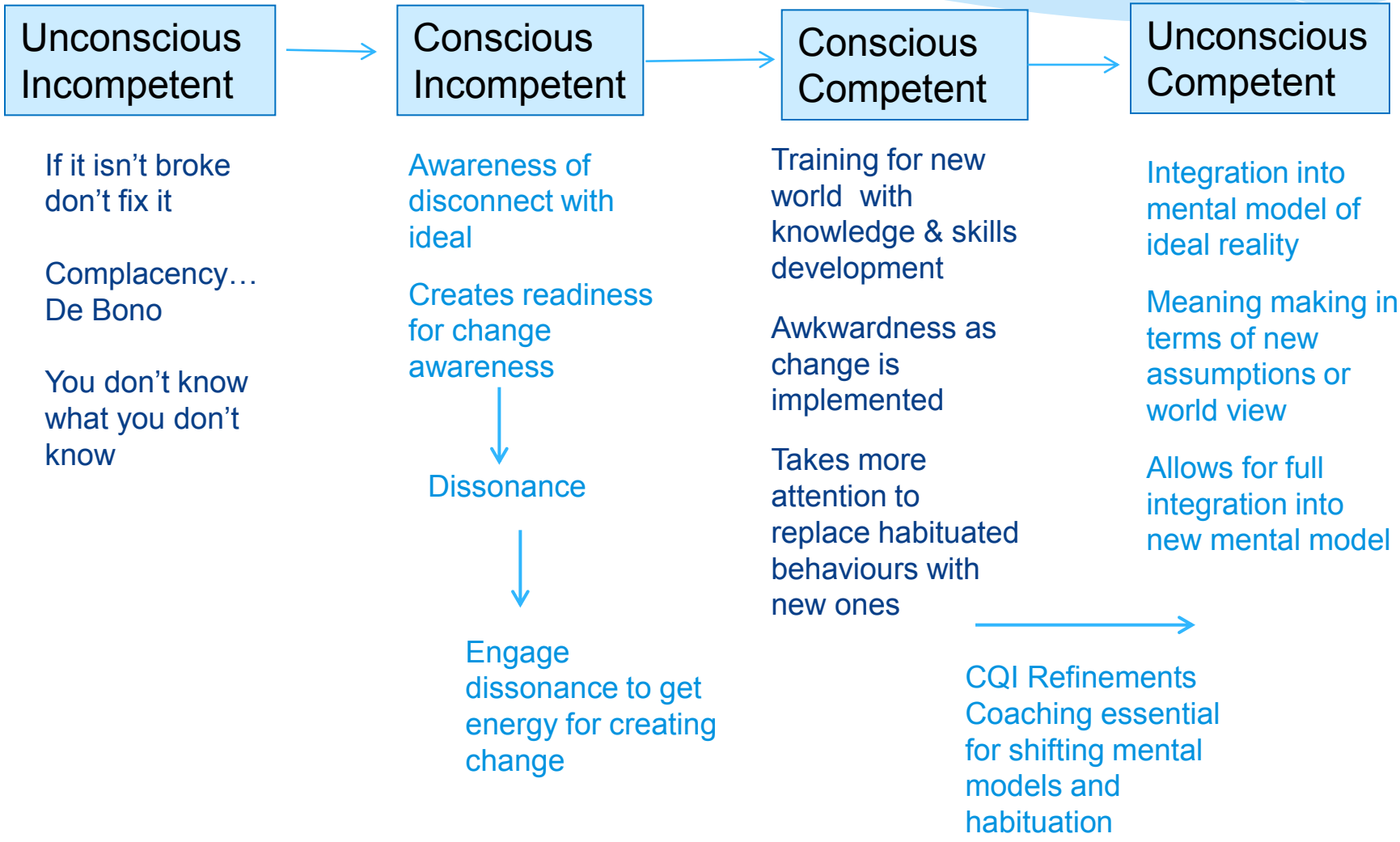
Managing Complex Change

Essential Components		Consequence if Absent
Vision for change	→	Confusion
Skills	→	Anxiety
Incentives	→	Gradual Change
Resources	→	Frustration
Action Plan	→	False starts, no traction

Leadership performance

Brown, D.C. (2003)

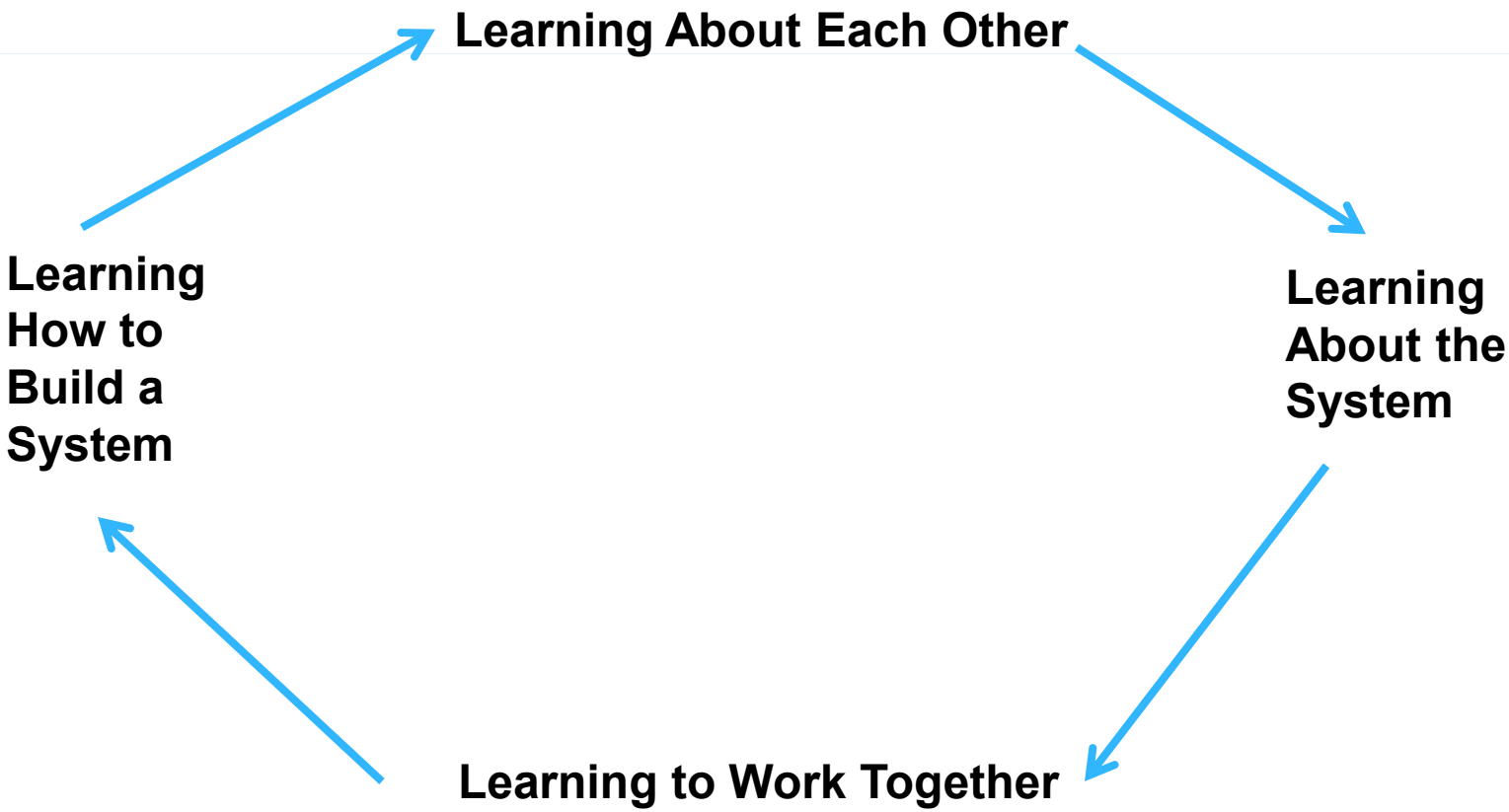
Understanding Change – An Adult Learning Perspective



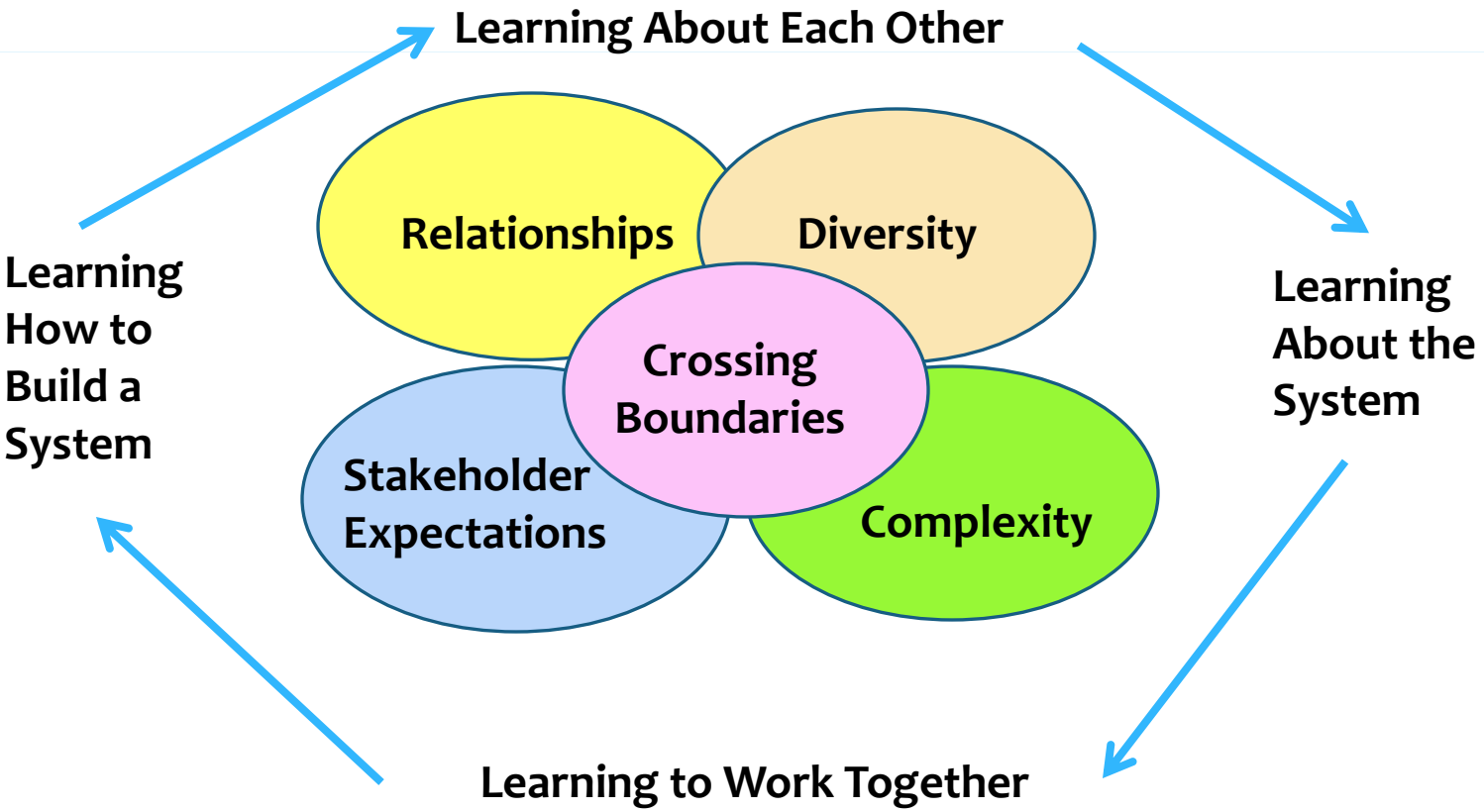
Robinson, (1974)

Where we need to focus for culture shift

System Level Change



System Level Change



Young, LM, (2007)

Supporting Change

Enabling Change

Who supports Baby-Friendly at your organization?

Enabling Change

Can you give an example of where someone in your organization came up with a good idea around supporting BFI?

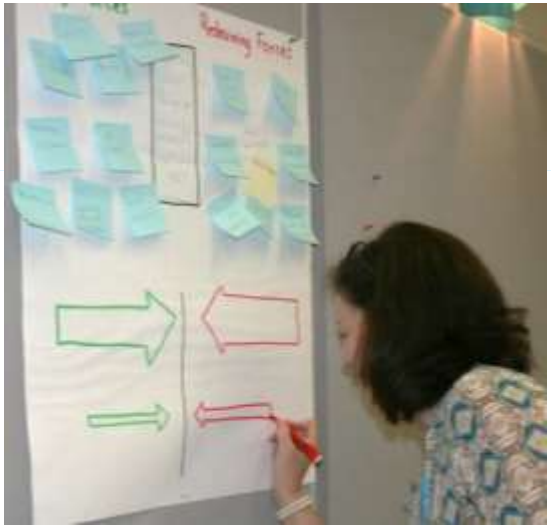
Do Not Reinvent the Wheel!

- ✓ Take advantage of existing supports
- ✓ Learn from others
- ✓ Leverage BFI Strategy for Ontario resources



BFI Implementation Toolkit & Workshops

Purpose:
Educate healthcare providers on how to implement the BFI at their organization



About:
Two healthcare providers from each area hospital, FHT, CHC, AHAC, NPLC and birth centre are invited to attend the FREE workshop

All participants receive a toolkit





BFI 20-Hour Course

Toolkit:

- How to support mothers and families in achieving their breastfeeding goals.



- Ready-to-use content including slides, speaking notes, activities and participant work book based on WHO breastfeeding course.

Workshops:

- Train the trainer teaches how to use content.
- Direct care provider course for hospitals/communities with lower birth rates.



Additional Tools





- Patient Education Materials
  - Translated Resources



- Microsite
  - www.tegh.on.ca/bfistrategy
- Coaching

Coming Soon

- E-Learning Course “BFI 101”
- BFI Clearing House

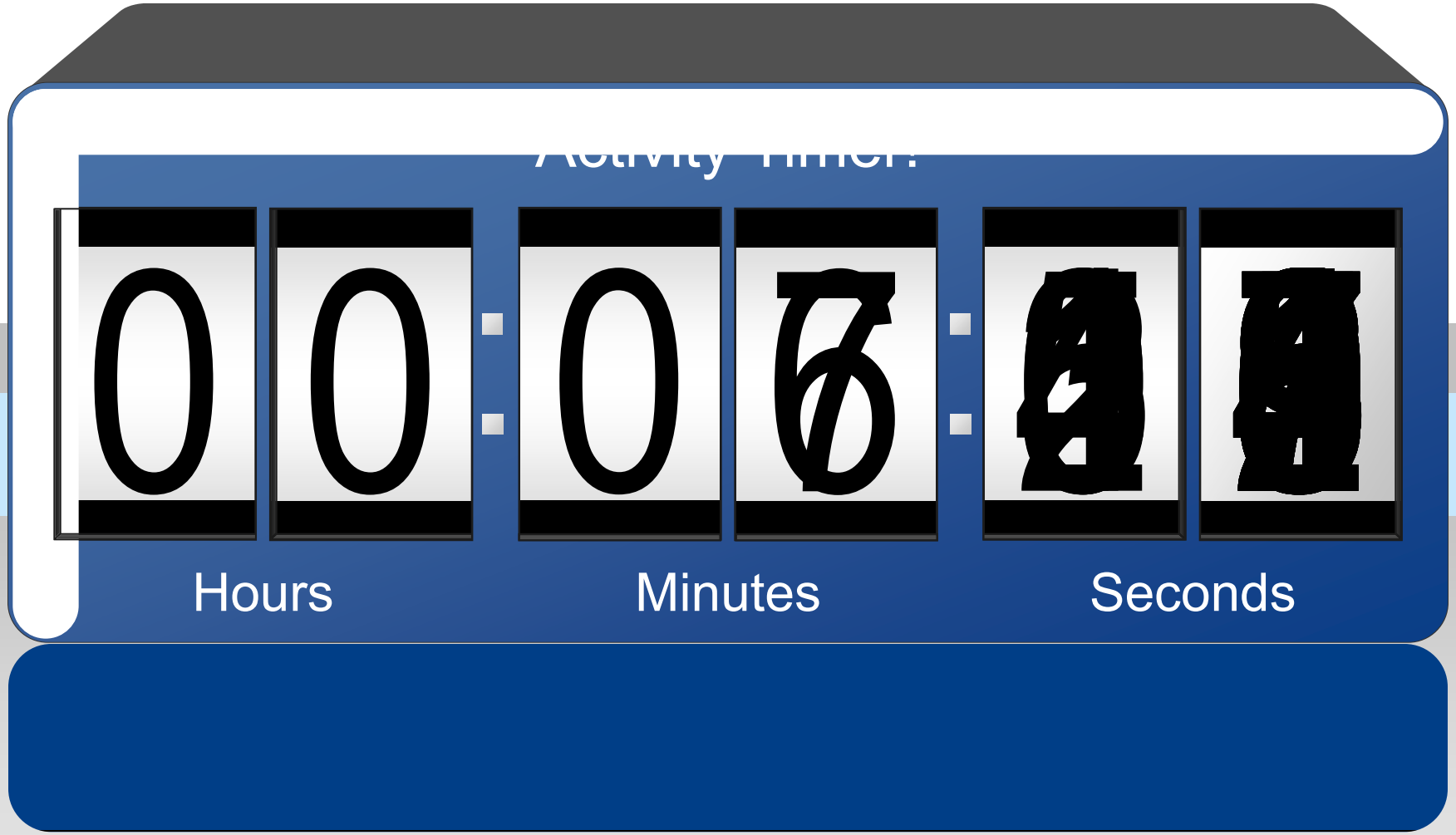
Café Activity

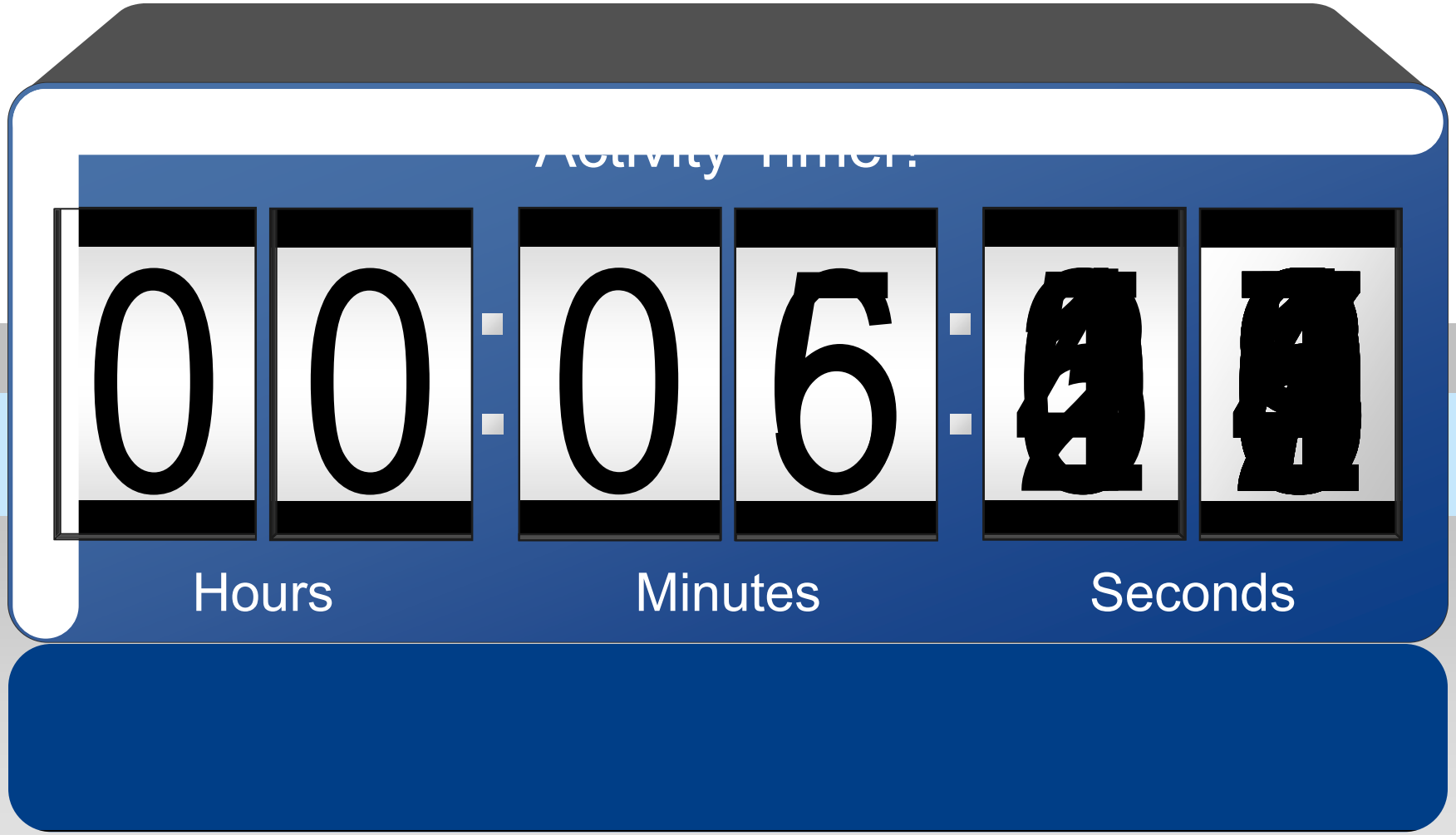
* At your table – introduce yourselves and identify one thing you are doing to support Baby-Friendly

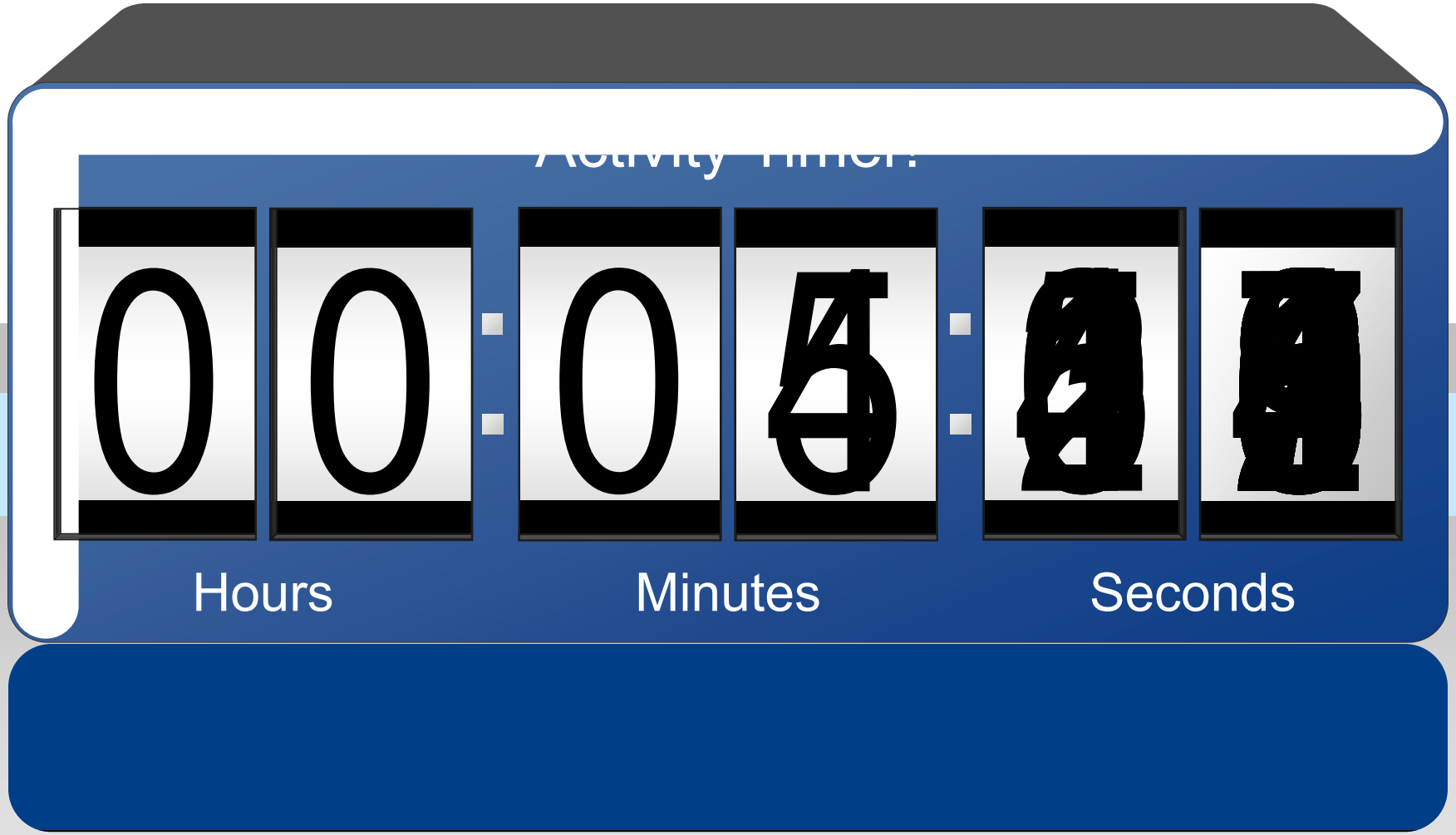
* 5 minutes per table
  * "Unbundle" and consider the issues
  * Note possible solutions/opportunities

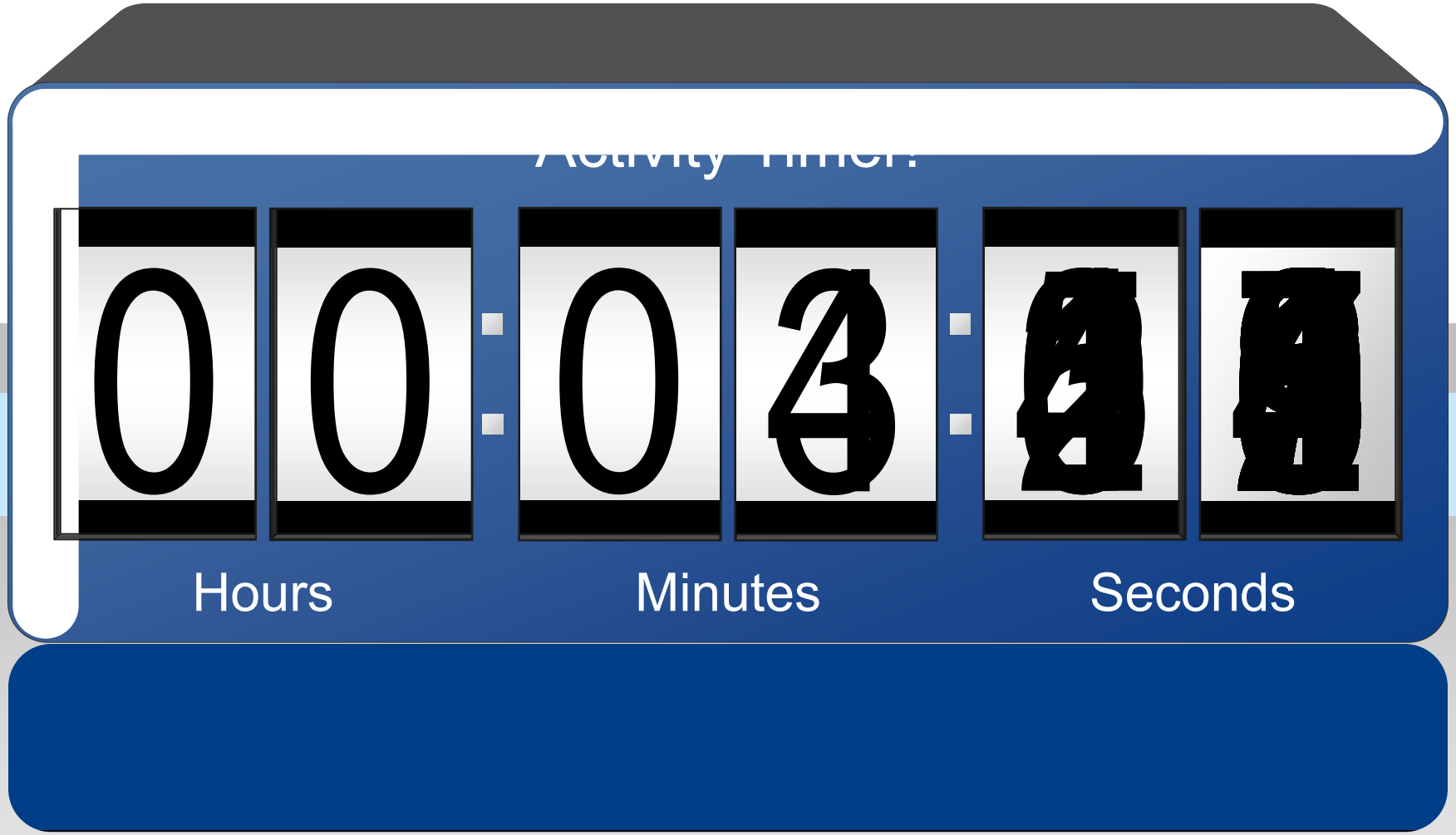
BUY-IN	
CHALLENGES	ENABLERS

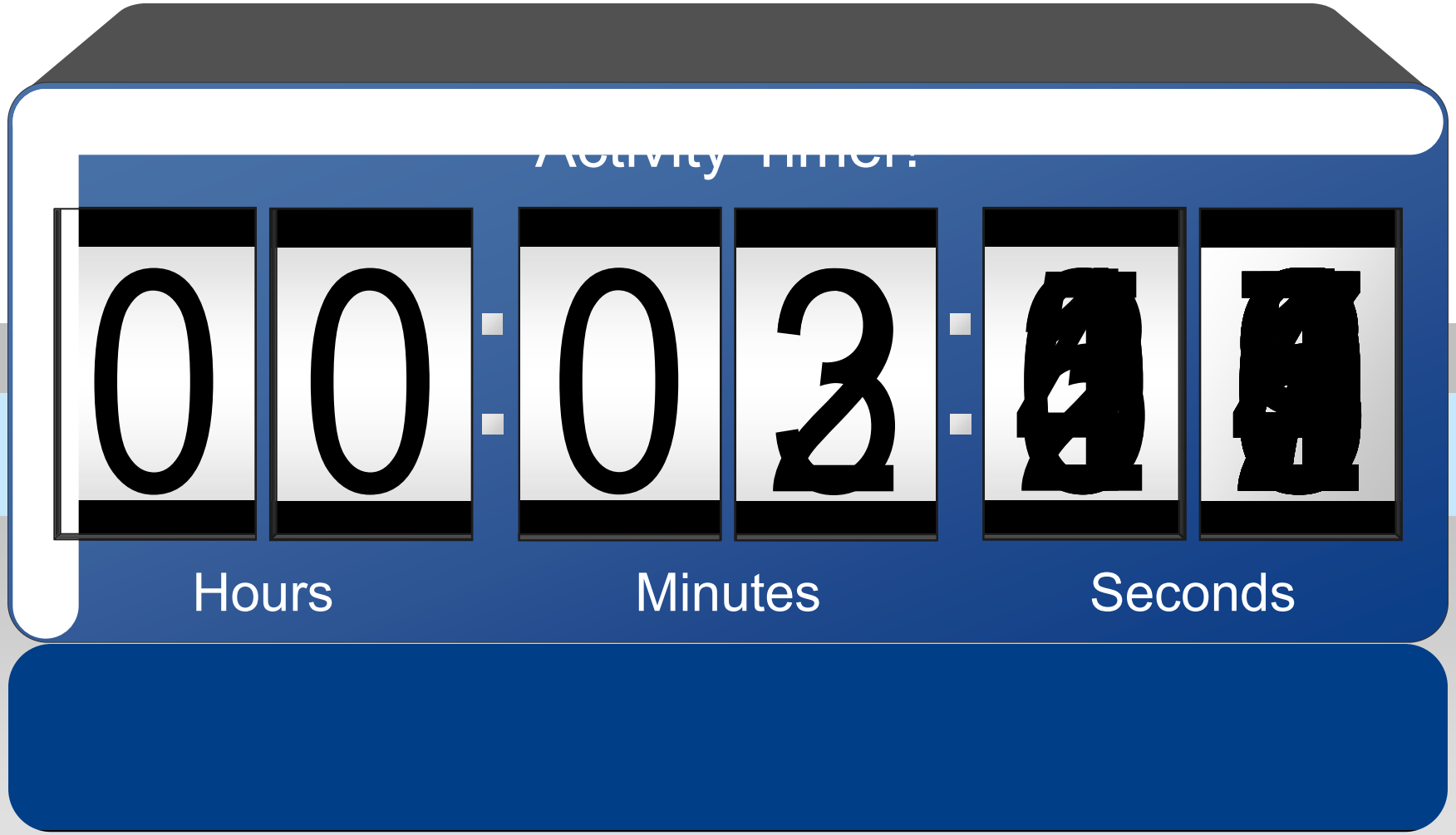
* All groups will rotate through each station until getting to last station – review all challenges and solutions. Circle top challenge and solution.

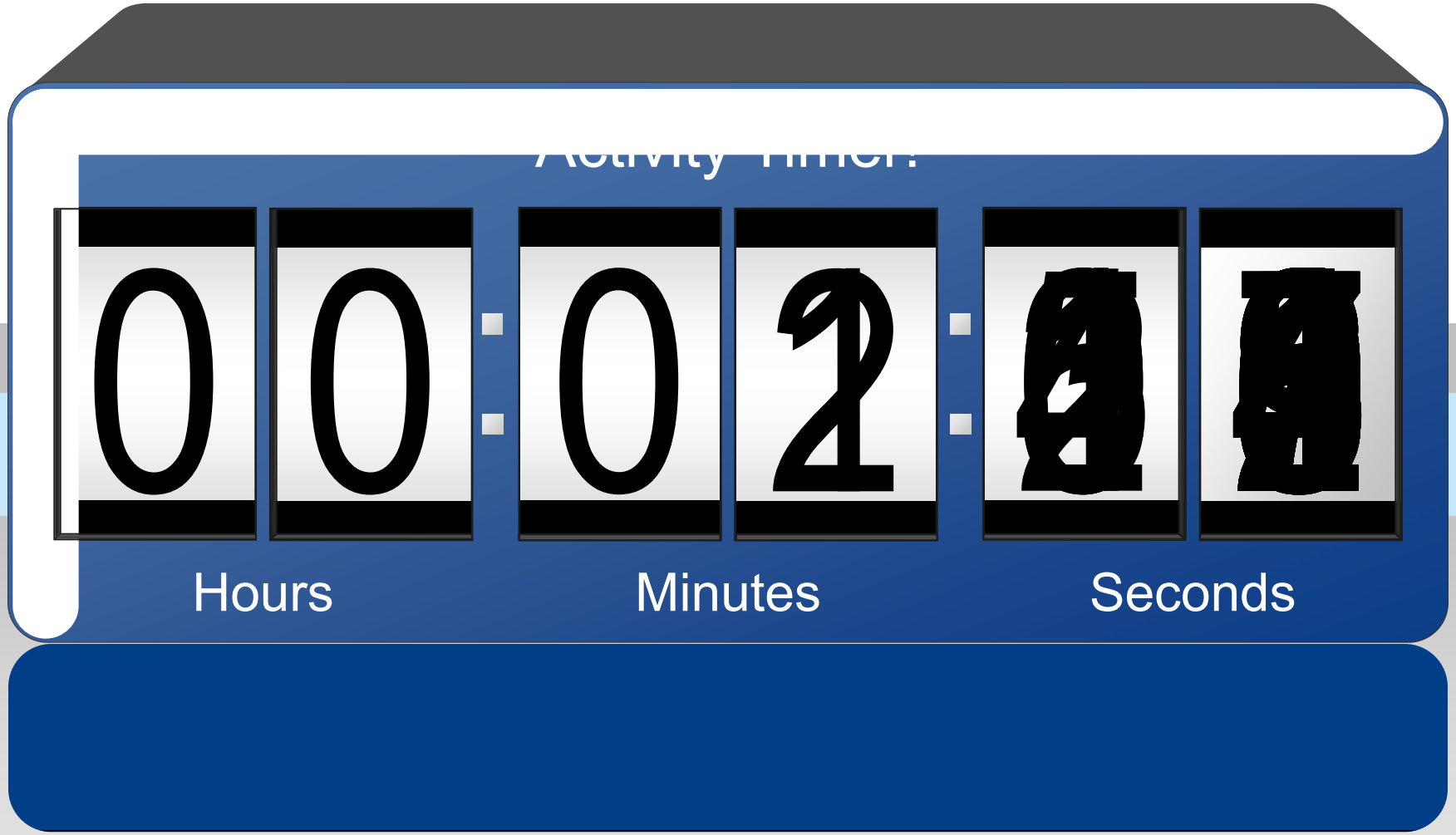

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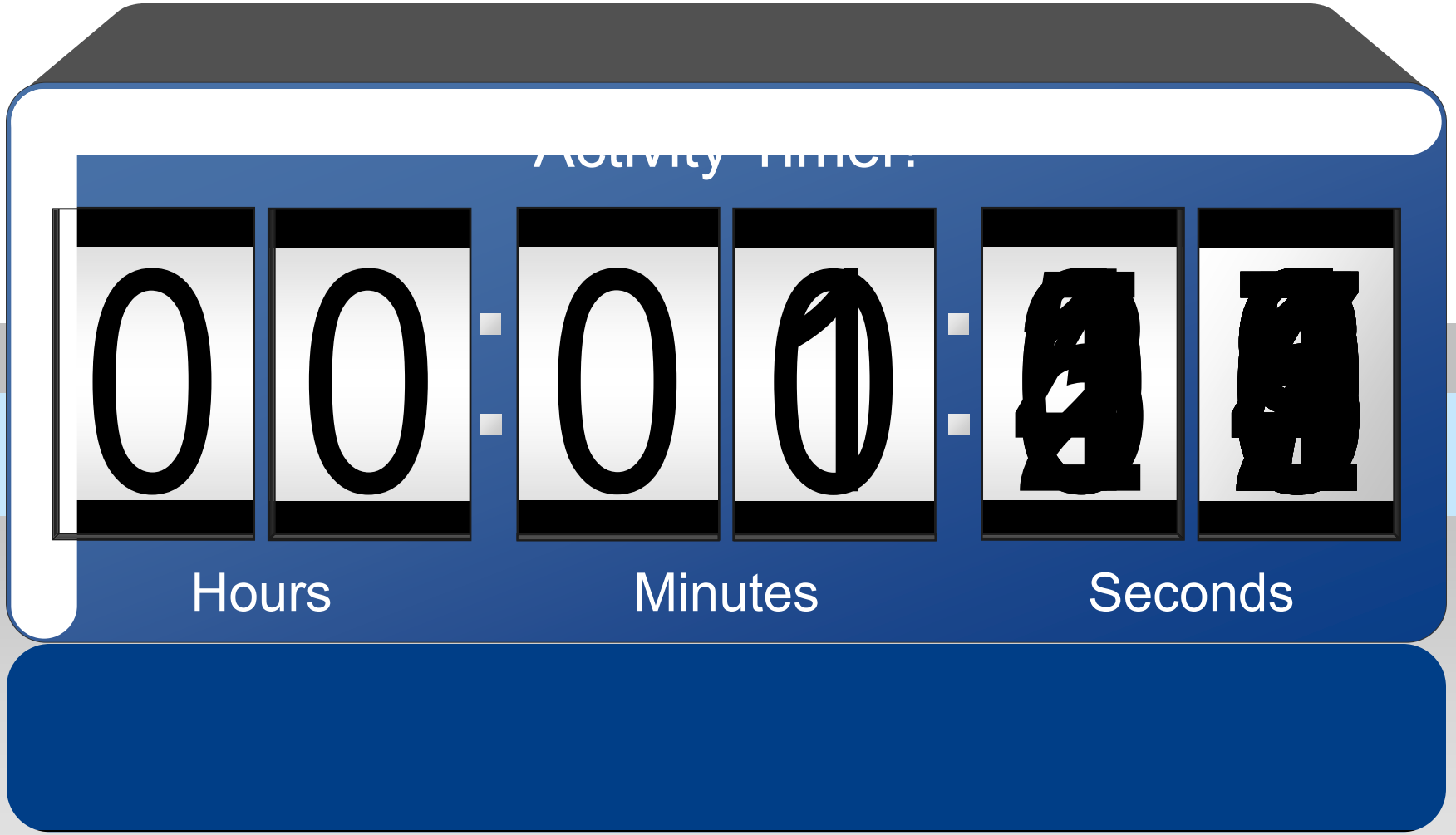

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Activity Timer
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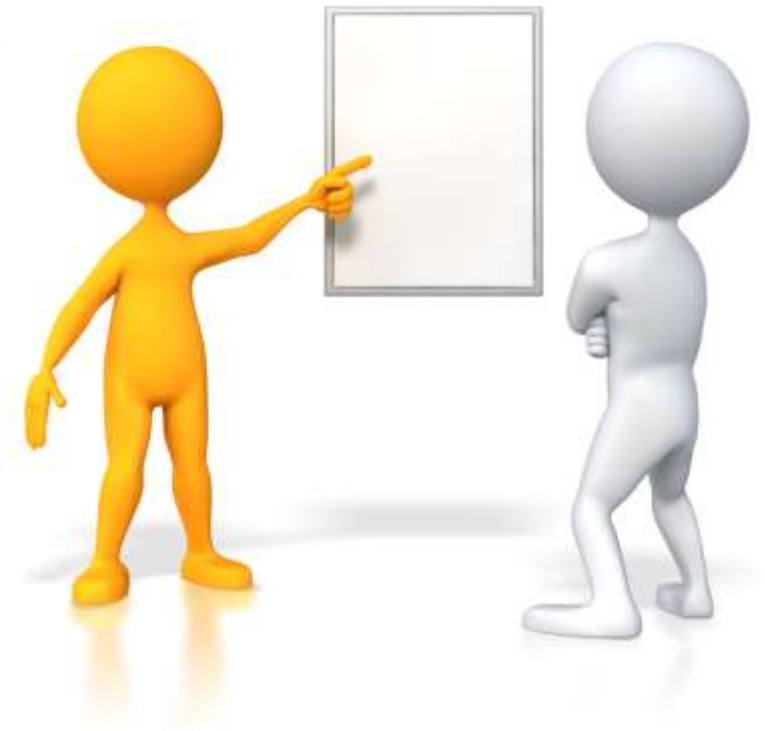

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Debrief

* What is one enabler that you think you might be able to leverage at your organization?
* What remains your major concern?
* Is there a challenge that is lacking an enabler?



Getting Started



Consider “Baby Steps”

* Designated breastfeeding area
* Draft policy
* WHO Code elements
* Skin-to-Skin

Let us help you!

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Growing a Baby-Friendly Ontario!