

Thompson General Hospital:

Lessons Learned on the Path to BFI

Presenters:

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Baby Friendly Conference 2011

Burntwood Regional Breastfeeding Committee

Membership

- Maternity Unit & Public Health Staff
- Obstetricians
- Dietitians
- Lactation Consultants
- Community Health Nurse
- Midwife Thompson
- Midwife Norway House
- Babies Best Start YWCA
- Public Health- Nelson House





Step 1: Breastfeeding Policy

- Policy was in draft for a number of years
- Finalized in 2009
- Copies available for all new staff, discussed at RHA general orientation
- Posted on Maternity Unit, Public & Community Health
- Breastfeeding interfaced with many programs.
- SUCCESS!

Step 2: Train all health care staff in skills necessary to implement the policy

- Staff began offering 18-hour course in 2003
- 20- hour course offered since ?
- General Orientation
- Breastfeeding workshop and conference
- Physician CME in Feb 2011
- Staff Education Cart since March 2011
- Skin-to skin lunch and learns





SUCCESS



Step 3: Inform pregnant women and their families about the importance and process of breastfeeding

- Prenatal classes offered through Public Health
- Healthy Baby (BRHA) & Babies' Best Start (YWCA)
- Northern Breastfeeding Workshop Oct 2010
- Northern Breastfeeding Conference Feb 2011





Step 3: Inform pregnant women and their families about the importance and process of breastfeeding con't..

- Hello Parents Parenting Conference March 2011
- Healthy Together Now (CDPI) Regional Conference– March 2011
- Travel to outlying and FN communities as requested
- Promotion
- SUCCESS!



Step 4: Place babies in uninterrupted skinto-skin contact with their mothers immediately following birth for at least an hour or until completion of first feed or as long as the mother wishes.

- Skin-to-skin after birth is now common practice in
 OR recovery for cesarean section
- Babies breastfeeding or skin-to-skin while lab work being done



Step 4: Place babies in uninterrupted skinto-skin contact with their mothers immediately following birth for at least an hour or until completion of first feed or as long as the mother wishes.

- Initiation rates are high but decrease at discharge
- LATCH-R very effective tool for OBS& Public Health staff
- SUCCESS & CHALLENGE!







Breastfeeding and skin-to-skin in operating room/recovery

Step 5: Assist mothers to breastfeed and maintain lactation should they face challenges including separation from their infants

- Hand expression education
- Consults to lactation consultants
- Breast pumps available in Thompson and outlying
 RHA communities through public health
- SUCCESS!

Step 6: Support mothers to exclusively breastfeed for the first six months, unless supplements are medically indicated

- Consent form has been developed for mother's who make the informed choice not to breastfeed
- Volume of formula given out per bottle has decreased
- SUCCESS & CHALLENGE!

Step 7: Facilitate 24-hour rooming-in for all mother-infant dyads: mothers and infants together

- Common practice at TGH
- Educate moms on safe sleeping practices
- Baby cues
- Breastfeeding support room on OBS
- Stats????
- SUCCESS!

Step 8: Encourage baby-led or cuebased breastfeeding

- Discuss baby-led breastfeeding with moms
- Awareness of cue based breastfeeding promoted
- SUCCESS!



Step 9: Support mothers to feed and care for their breastfeeding babies without the use of artificial teats or pacifiers

- Past practice to offer to all moms
- Currently not given unless absolutely requested by mom
- SUCCESS & CHALLENGE

Step 10: Provide a seamless transition between the services provided by the hospital, community health services and peer support programs

- Postpartum referral process is quick
- All breastfeeding moms are open to PHN caseload in BRHA communities
- Lactation consultant referrals
- Work with OB-Gyne for APNO
- Breastfeeding Support group- once weekly
- Lack peer support programs
 - SUCCESS & CHALLENGE!

Breastfeeding Challenges





Success

BABIES BEING BREASTFED RESEARCH PROJECT

- Research of BRHA CEO Gloria King for Masters in Public Health
- Chart review and telephone survey of 234 Moms to gather information re: breastfeeding experience and determine factors related to duration of breastfeeding
- Presented at Breastfeeding Grand Rounds

Success continues ©

- Milk for Milk project
- CPNP collaboration
- Number of RHA staff working towards LC designation
- World Breastfeeding Week Regional Promotion
- Breastfeeding Challenges
- Rural Week 2011
- Healthy Together Now (CDPI)
- MOCK ASSESMENT SEPTEMBER 2009

Bumps in the Road to BFI

- Decreased initiation and discharge rates geography of region makes it difficult
- Our biggest challenge will be obtaining 75% exclusive breastfeeding at hospital discharge
- Need to focus on outreach/collaboration with First Nations Communities, Nursing Stations and CPNP to support BF moms
- Peer support

Thanks for your time ©

The Breastfeeding Committee for Canada (BCC)

The National Authority for the WHO/UNICEF Baby-Friendly Hospital Initiative (BFHI) in Canada

Thompson Hospital

In Recognition

of the effort and commitment of the staff as they begin the journey lowards WHO/UNICEF 'Baby Friendly' designation through completion of their implementation plan for the BCC BFI Indicators

Presented by the Baby Friendly Manitoba Implementation Committee and the Breastfeeding Committee for Canada

> Baby Friendly Manitoba Breastfeeding Committee for Canada P/T Breastfeeding Committee

Valid: January 1, 2011 to December 31, 2011