

Navigating the Challenges of Becoming Baby-Friendly

Presenters:

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BABY-FRIENDLY
INITIATIVE STRATEGY
ONTARIO



Objectives

Participants will leave this workshop with:

- * An understanding of common roadblocks related to Baby-Friendly implementation.
- * Theory, practical tools and advice to support your BFI implementation journey.
- * Experience applying theory, practical tools and advice in case studies.
- * Advice and guidance from colleagues on overcoming your own challenges and roadblocks.

Road Map

1. BFI & Common Roadblocks
2. Thinking Differently About Change & “Getting Unstuck” Roadmap
3. Application in Case Studies
4. Peer Consultations on Your Challenges

Break 10:30-11:00

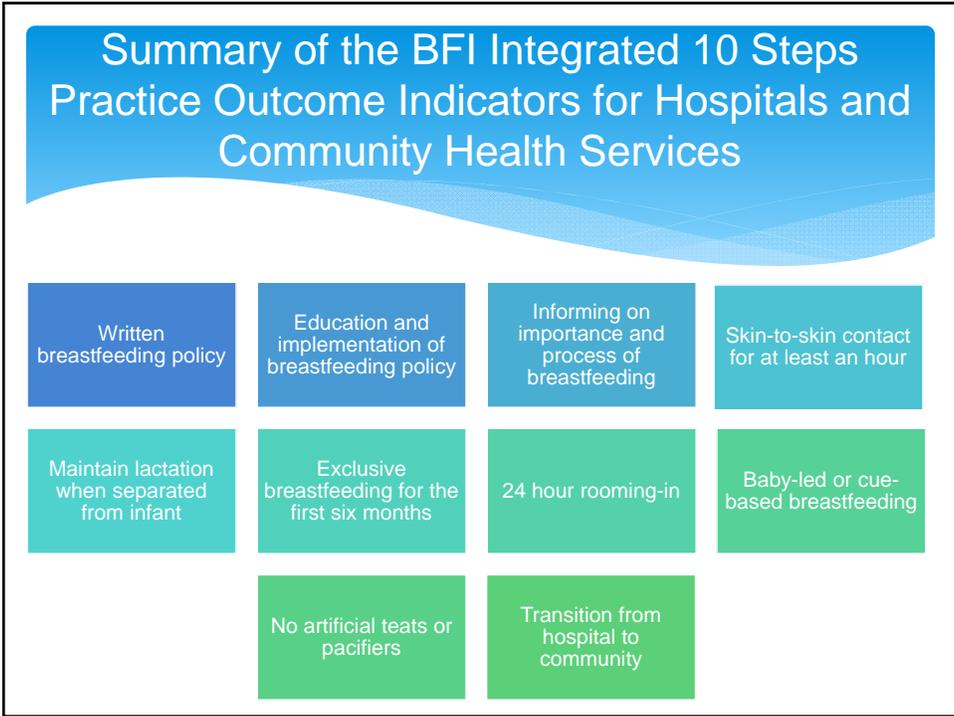
What is the Baby-Friendly Initiative?

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



Principles

- ✓ Inclusive of all infants regardless of how they are fed
- ✓ Evidence-based and best practice
- ✓ Informed decision making
- ✓ Supports breastfeeding across the continuum of care through consistency and collaboration



The Baby-Friendly Initiative

Practice Changes + healthcare
environment + values/beliefs
= complex change

Reflecting On Your Challenges



- * Are you stuck or have you gotten stuck?
- * What are your roadblocks?

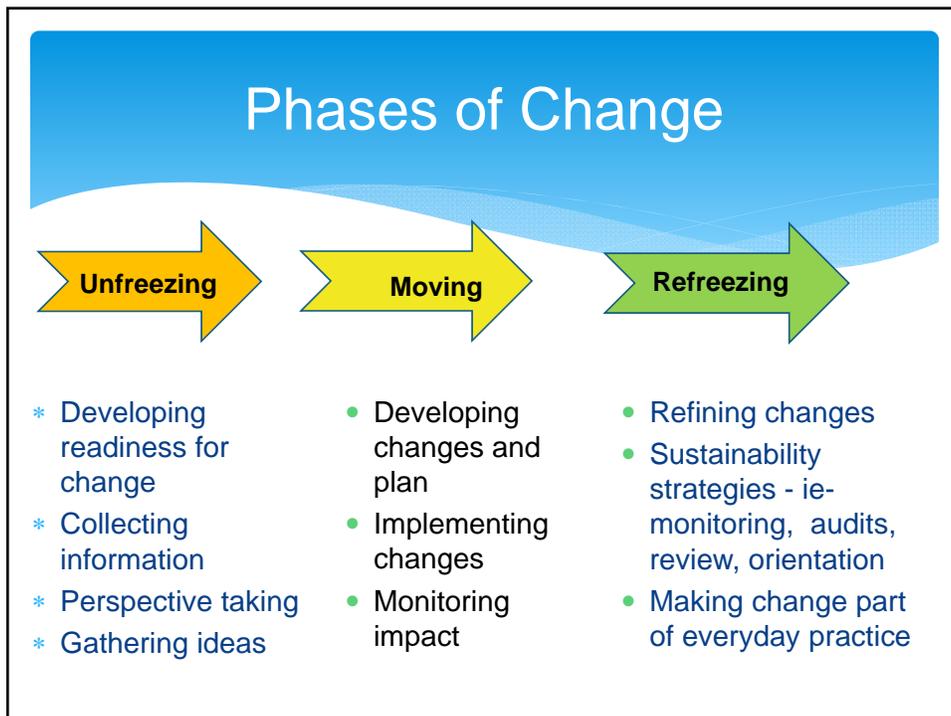
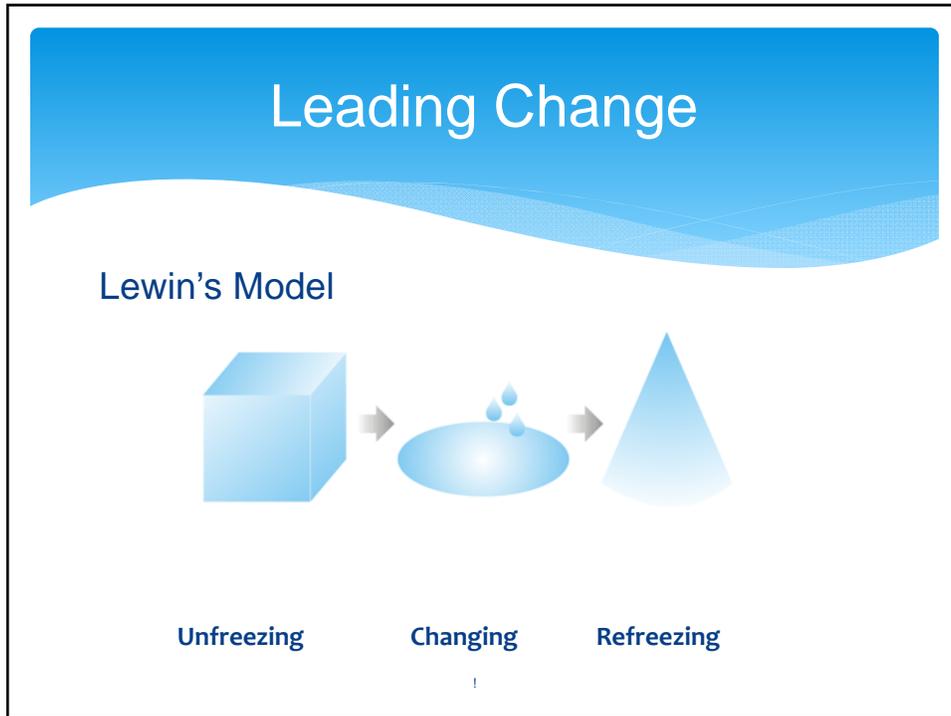
Coaching Requests

Implementation Requirements provincial
post-implementation understanding objectives skin-to-skin
education policies volumes starting
teaching promise report expectations physician engage
hypoglycemia already course breastfeeding coaching friendly
webinar hospital data committee feeding TTT
hats timing information development position documents
leaders Hour decanting BFI formula decision make
capacity NICU ideas status process BFI Review Network
certificate status process BFI Review Network resources
Follow-up questions policy steps staff costs about
develop better support question further parents
momentum FHT New support question help video partners
journey determine clarification Code care sustainability
theme Work family presentation bring own
coalition families request strategy informed preparing
workplan physicians collection designation
Preassessment brainstorm Wanting supplementation
eligibility compliance template



Thinking Differently About Change





A State of Continuous Change

- * Every change has a ripple effect creating many small changes
- * Sometimes ripples clash with each other creating the impression of bigger changes
- * Simultaneous changes in our personal lives may impact our ability to cope with work changes
- * Increasing interdependence among health care organizations makes us more vulnerable to simultaneous changes from external and internal worlds



Common Reactions to Change



How do people react to change?

Common Reactions to Change

- * Fear of change and what it may mean, fear of unknown
- * Resistance to anything new
- * Poor risk taking
- * Egocentricity
- * Lack of commitment or energy
- * Withdraw from others
- * Blaming others for problems
- * Complaining about issues
- * Feeling overwhelmed
- * Loosing sleep, worrying
- * Overeating, undereating



Navigating Change – What do You Need?



You Need a Clear & Compelling Vision

- * Is your vision clear to you and to others?
- * Was your vision developed by an individual or a team?
- * Is the vision your vision or the team's vision?
- * Has the vision been communicated?



In the end the vision MUST be a shared vision

You Need a Team

- * Do you have all the stakeholders involved?
- * Are you aware of each person's strengths and passions?
- * Are you using the diversity of your members?



A good change leader harnesses the wisdom of others and brings out the very best in the team

You Need to Understand the Change

- * **What is the level of the change?**
System, Organizational, Departmental, Interprofessional, Team, Personal
- * **What is the context?**
Have to...want to? Political, safety/risk/quality, budget related? Internally or externally driven?
- * **Who are your stakeholders?**
- * **What forces will impact the change?**

Energy related to the Change

The diagram features a yellow vertical box on the right containing the text 'Energy related to the Change'. Four colored arrows point from the four bullet points on the left towards this box: a yellow arrow from the first point, a pink arrow from the second, a green arrow from the third, and a red arrow from the fourth.

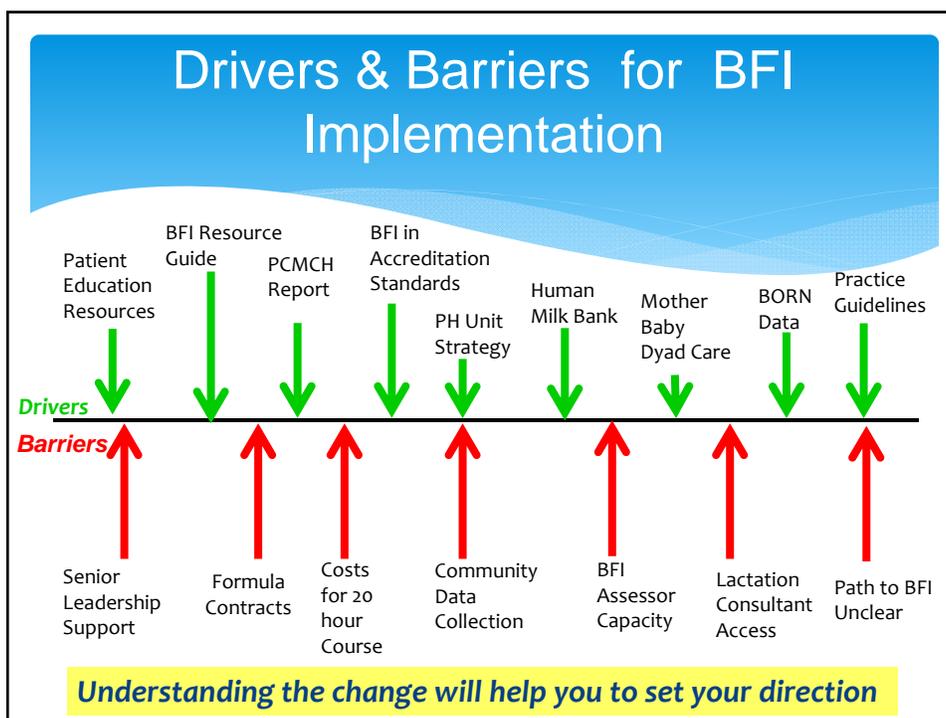
What Will Impact Change?

Force Field Analysis

Driving Forces

Restraining Forces

The diagram shows a central vertical blue line. To its left are three green arrows of varying lengths pointing to the right, labeled 'Driving Forces'. To its right are two red arrows of varying lengths pointing to the left, labeled 'Restraining Forces'.



You Need an Engagement Strategy

- * Are you aware of your early adopters?
- * Have you created an understanding of the need for change?
- * Have you created curiosity & excitement about the possibilities?
- * Do stakeholders have an ability to influence the change? Are you LISTENING??

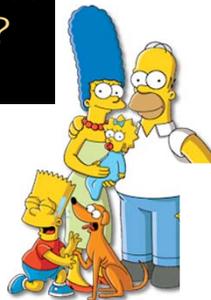
A good engagement strategy will give you a tipping point for moving forward positively.

Answer Two Questions

WHAT'S
IN IT
FOR ME?



WHAT'S
IN IT FOR
THEM?



Are the answers apparent to your stakeholders?

You Need a Work Plan

- * Are the buckets of work clear?
- * Do you have target dates?
- * Are the targets realistic?
- * Are accountabilities assigned?
- * Do you have leadership support?
- * Are you recognizing small successes?
- * Do team members feel appreciated?

WHO Code Compliance

- ✓ Stakeholder Team
- ✓ Understand the code
- ✓ Common violations
- ✓ Practice changes
- ✓ Policies
- ✓ Compliance audits
- ✓ Outcome measures
- ✓ Communication plan

A good work plan will support coordination and assist with maintaining alignment

You Need a Monitoring and Evaluation Plan

- * Do you have a simple way of tracking progress?
- * Have you identified key milestones?
- * Do you have a visual way of representing progress?
- * Are you sharing this?



Designing your evaluation up front ensures you are clear about what success looks like

You Need to Understand Yourself

- * How you **respond** to / cope with change?
- * How you feel about **this** change?
- * Do you **believe** you can do this?
- * Are you up for the challenge???
- * What is likely to **frustrate** you?
- * Can you be comfortable with **ambiguity**?
- * How will you maintain your **balance**?



Knowing yourself and your limitations will help you to be a more effective leader

Leadership for Change

*As a leader your job is to understand the change, uncover barriers, encourage ingenuity, help your team believe **it can be done** and that **the outcome will be amazing!!!!***



Techniques for Navigating Change

- * **Unbundling** ...you need to understand the world as it exists now before the change...*what is of value to people...what outcomes do you need to keep? Who are your stakeholders? Who might be impacted by the change?*
- * **Reframing** – By understanding the change you can uncover the assumptions that are keeping the status quo and start to challenge these
- * **Engaging Others**...Organizing Genius HOW???...the story of Great Groups

Techniques for Navigating Change

- * **Being curious...Play with ideas Ask yourself and others... What if?...**uncover and try to understand the real fears...appreciate others' strengths
- * **Having fun** ...being silly sometimes...play with the absurd...innovation comes from playfulness and putting unusual pieces together
- * **Practice the Art of Possibility** – Help others to practice the art of possibility & to believe it can be done...Take a few minutes to just be present with others and muse with them...water cooler conversations...serendipity



Techniques for Navigating Change

- * **Building resilience to change**...building capacity... Coaching and supporting through ambiguity...maintaining balance
- * **Slowing down to speed up**...be patient at the right time...if something does not feel right, if you are pushing hard and seeing signs of distress then back off...when you are in frenetic activity you will miss important things, you will not be able to use your intuition
- * **Self Management is Important!!** Be prepared to stretch... listen to yourself talk...monitor your “yes but” and “no” muscles... As leaders you must find the positive in the change!

Complex Change



Phases of Complex Change

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

Pre-announcement

- Tentative plan for changes- why, when, how
- Gathering support
- Gathering vision



Transition

- Communicating structure
- Keeping staff engaged through responsive dialogue & consultations
- Discussing benefits
- Thank you



Consolidation

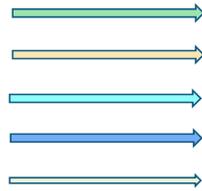
- Revisions
- Reward & recognition
- Formal evaluation
- Debriefing on lessons learned
- Celebrate

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

Managing Complex Change

Essential Components

- * Vision for change
- * Skills
- * Incentives
- * Resources
- * Action Plan



Consequence if Absent

- Confusion
- Anxiety
- Gradual change
- Frustration
- False starts, no traction

**Leadership performance...
your personal contribution**

Brown, D.C. (2003)

Implementing Complex Change

- * Transformational change occurs at individual, program and organizational levels...need to address all of these
- * Balance planning, structure and a focus on an aspirational vision with managing the human side of change, being present
- * 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

CASE STUDIES

Navigating the Challenges of Becoming Baby-Friendly

<p>Engaging stakeholders</p> <p>Misconceptions and assumptions</p> <p>Values and beliefs</p> <p>Lack of buy-in from leadership, colleagues and physicians</p> 	<p>Implementation in our lean healthcare environment</p> <p>No time</p> <p>No money</p> 	<p>Community enablers</p> <p>Lack of coordination amongst healthcare providers</p> <p>Little community breastfeeding support</p> 
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Case Study #1



Rina, an RN working at Townsville CHC, is eager to begin working towards BFI designation. When she mentions the idea to a physician, she received the response that “*Breastfeeding-Friendly Initiative* just isn’t a priority...and we’re definitely not going to force all new moms to breastfeed”.

Group discussion: What next steps can Rina take?

What are some key messages that Rina can communicate to her colleagues?

What were some of your first steps when communicating the BFI? Who were the key stakeholders that you informed? What were key messages that you shared?

Available Tools to Support You

- * One-on-one coaching
- * Presentations
- * E-Learning
- * Webinars
- * Site Visits

Email us at bfistrategy@tegh.on.ca



Implementation Progress

- **80** hospitals engaged (88%)
- **44** hospitals have moved at least one step closer to designation since April 2014

BABY-FRIENDLY
BIRTHPLACE CERTIFIED
ONTARIO

BFI IMPLEMENTATION STATUS REPORT TOOL

Name of Organization: _____
 Date: _____ Name: _____ Role: _____ Email Address: _____ Telephone Number: _____

SECTION 1 - DESIGNATION PROCESS														
Foundational Work			Intermediate Work			Advanced Work			BFI Designation					
<input type="checkbox"/> Act Fair and Follows Infant Implementation	<input type="checkbox"/> Copy of BCC BFI Practice Outcome measures obtained and reviewed	<input type="checkbox"/> Management support from senior leadership obtained	<input type="checkbox"/> Accreditation BFI Committee developed to lead changes and lead members	<input type="checkbox"/> Compliance of Infant and Safety assessed	<input type="checkbox"/> Data reviewed and assessed	<input type="checkbox"/> Initial self-assessment completed	<input type="checkbox"/> Review panel plan developed	<input type="checkbox"/> Assessment to gather feedback or benchmarking support and review improvements established	<input type="checkbox"/> Committee of Physicians resources from BCC	<input type="checkbox"/> Equipment Review completed	<input type="checkbox"/> Assessment Map completed	<input type="checkbox"/> Table for External Site Visit set	<input type="checkbox"/> BCC Site Visit Completed	<input type="checkbox"/> Plans for successfully meeting quality improvement process REQUIRED
Target Date: _____														
Date: _____														
SECTION 2 - IMPLEMENTATION OF PRACTICE OUTCOME INDICATORS														
STEP 1			STEP 2			STEP 3			STEP 4					
Written breastfeeding policy			Implementation of policy & education			Inform pregnant women & families on importance of breastfeeding			Skill for infant stimulation			Partner with breastfeeding challenges, including separation		
<input type="checkbox"/> Policy drafted	<input type="checkbox"/> Policy approved	<input type="checkbox"/> Policy communicated to all health care providers	<input type="checkbox"/> Family-friendly version of policy posted	<input type="checkbox"/> Plan in place to support non-breastfeeding mothers	<input type="checkbox"/> Practices revised to ensure compliance with minimum care or separation of immediate discharge	<input type="checkbox"/> Plan developed for training direct care providers	<input type="checkbox"/> Plan developed for training "trusted" care providers developed	<input type="checkbox"/> Education complete including staff, physicians, midwives, nurses and employees	<input type="checkbox"/> % direct care providers trained	<input type="checkbox"/> Plan for continuing education developed	<input type="checkbox"/> Evidence of general education regarding breastfeeding including importance of exclusive breastfeeding	<input type="checkbox"/> Process in place for supporting families in making informed decision re use of experimentation or alternative feeding	<input type="checkbox"/> Documentation tools reflect assessment and auditing for BFI	<input type="checkbox"/> Patient teaching materials reviewed to be in compliance with BFI
<input type="checkbox"/> Unannounced observation is conducted in the immediate postpartum period until after the 1st feed or longer	<input type="checkbox"/> After vaginal birth	<input type="checkbox"/> After caesarean birth	<input type="checkbox"/> OR	<input type="checkbox"/> Skin-to-skin contact is promoted in community	<input type="checkbox"/> Mothers receive breastfeeding support and teaching	<input type="checkbox"/> Mothers are taught hand expression	<input type="checkbox"/> Strategies developed to assist mothers with lactation challenges	<input type="checkbox"/> Best practices from BCC BFI Practice Outcome measures are assessed to support women with breastfeeding challenges including separation of mother and infant						

Case Study #2



Moira has just developed her hospital's BFI work plan and is wondering how any progress will be made without dedicated time and resources. She has been told by leadership that, at this time, there are no additional funds that can be put towards BFI implementation.

- Group discussion:** What supports might Moira utilize to minimize the internal resources required to do this work?
- What pieces of BFI implementation might be less resource intensive, as starting points?
- What creative solutions did you develop when you had little time and resources to support BFI implementation?

Available Tools to Support You

- * Coaching
- * Regional networks/coalitions
- * BFI Implementation Workshops & Webinars



www.breastfeedingresourcesontario.ca

Case Study #3

Jill and Dawn have been leading BFI implementation at the BigHill FHT for the last year. They are working on a grant application to begin a breastfeeding class, as there is no breastfeeding support available at the FHT. She is surprised to overhear a parent in the waiting room discussing a breastfeeding peer support program that is being launched next week at a CHC a few blocks away.



Group discussion: Where are the opportunities to increase collaboration in this community?

What have you done to increase collaboration with your partners? How has this improved breastfeeding support for families in your community?

Applying Lessons to Your Challenges

Consultation Exercise

- * Each participant (“client”) shares their challenge
- * Tablemates (“consultants”) will come up with one idea from your experience or based on what you have learned today
- * SPEED DATING! Quick idea sharing



Starting the Conversation

- * Have you thought about...
- * Why don't you try...
- * What worked for us was...



Unbundling and Reframing

* We don't have enough resources



- * How do we use what we have to do what we can?
- * Who is missing? What are their strengths? How do we get them to help?

* We can't do anything about this



- * The solution to this challenge is yet to be discovered. I wonder what we are missing?

Unbundling and Reframing

- * It's going to take too much time

- * It feels like we are getting nowhere

Use the time you have to:

- * Slow down and listen
- * Discover what is already happening
- * Make people curious

- * Set short term goals
- * Make a list of what has been done
- * Celebrate!

Navigating the Challenges of Becoming Baby-Friendly

Understand

Change Theory & Common Barriers to Change

Identify

Determine Your Current State
Identify Vision and Future State

Overcome

Implementation
Education
Sustainability

National Institute for Health , 2007



Let us help you!

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Kristina Niedra

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knied@tegh.on.ca

Growing a Baby-Friendly Ontario!

The slide contains contact information for Linda Young and Kristina Niedra, including their email addresses. Below the text is a sequence of five grey silhouettes illustrating a baby's developmental stages: lying on its back, crawling on its stomach, crawling on its hands and knees, crawling on its hands and knees, and standing.