

# Navigating the Challenges of Becoming Baby-Friendly

**Presenters:**

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**BABY-FRIENDLY**  
**INITIATIVE STRATEGY**  
**ONTARIO**



TORONTO EAST  
GENERAL HOSPITAL



best start  
meilleur départ  
by your health together

## 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

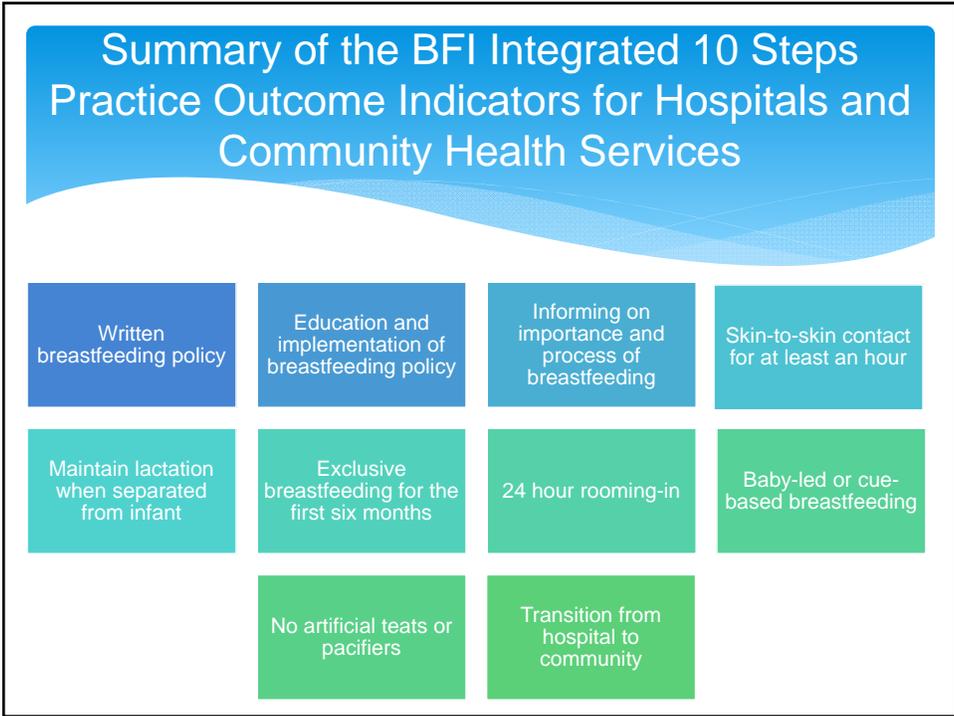
## What is the Baby-Friendly Initiative?

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?

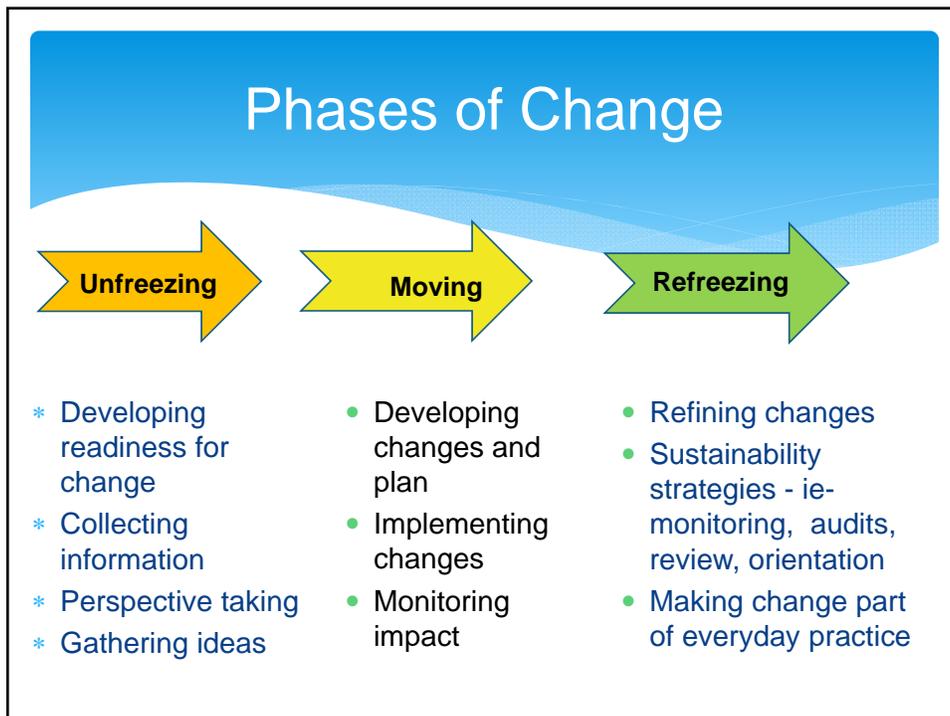
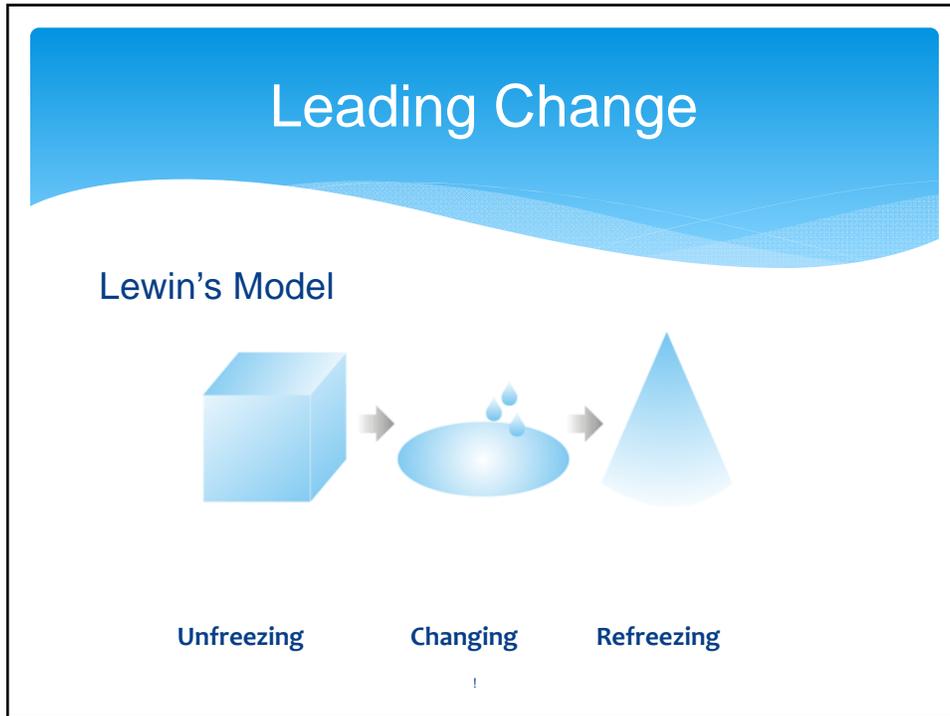
# Coaching Requests

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.

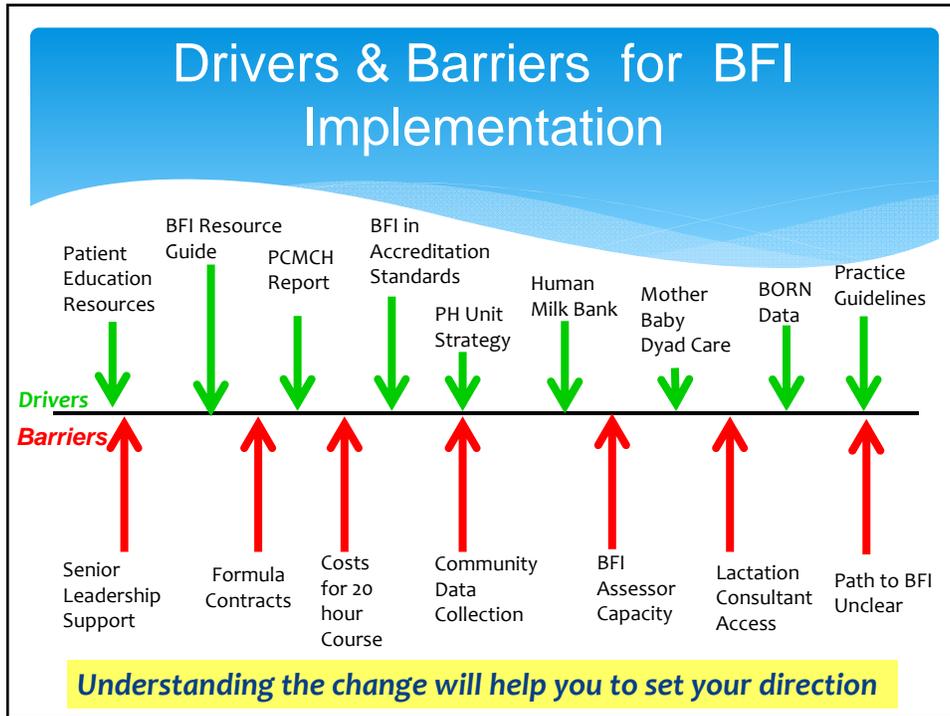
## What Will Impact Change?

Force Field Analysis

**Driving Forces**

**Restraining Forces**

The diagram shows a central vertical blue line. To its left are three horizontal green arrows of varying lengths, all pointing to the right. To its right are two horizontal red arrows of varying lengths, both pointing to the left.



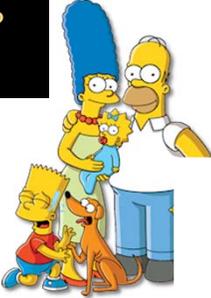
## You Need an Engagement Strategy

- \* 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

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

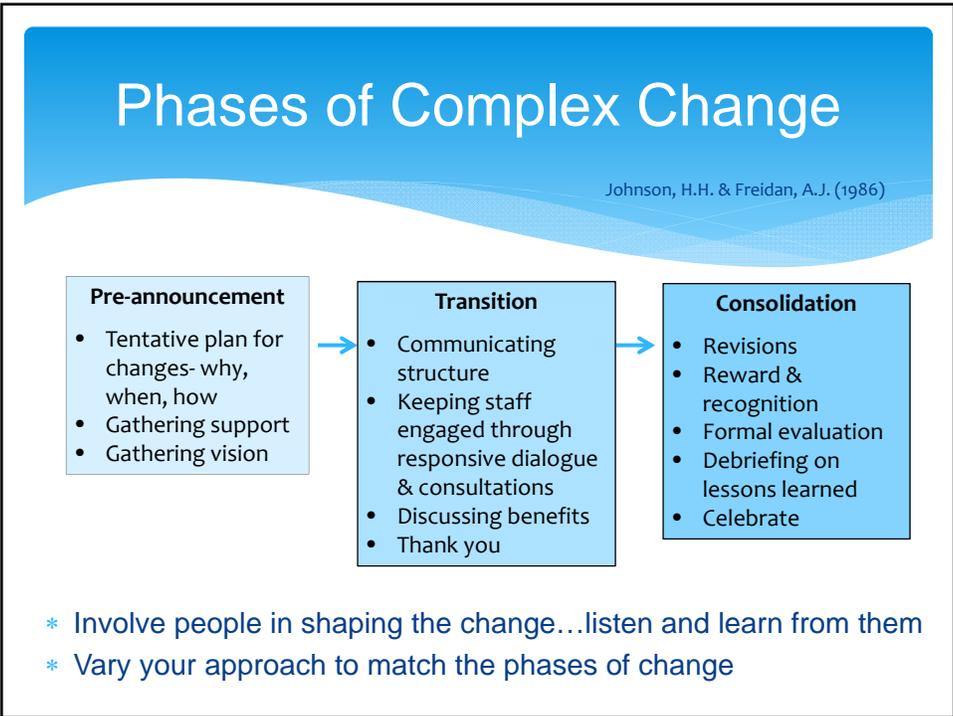
## Techniques for Navigating Change

- \* **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

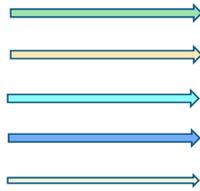
- \* **Building resilience to change**...building capacity... Coaching and supporting through ambiguity...maintaining balance
- \* **Slowing down to speed up**...be patient at the right time...if something does not feel right, if you are pushing hard and seeing signs of distress then back off...when 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!



## 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><b>Engaging stakeholders</b></p> <p>Misconceptions and assumptions</p> <p>Values and beliefs</p> <p>Lack of buy-in from leadership, colleagues and physicians</p> 	<p><b>Implementation in our lean healthcare environment</b></p> <p>No time</p> <p>No money</p> 	<p><b>Community enablers</b></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](mailto: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 Information	<input type="checkbox"/> Copy of BCC BFI Practice Outcome Measures returned and received	<input type="checkbox"/> Assessment support from BCC BFI Center developed to meet changes and used monthly	<input type="checkbox"/> Compliance of Infant and Learning assessed	<input type="checkbox"/> Data reviewed	<input type="checkbox"/> Initial work completed	<input type="checkbox"/> Review plan developed	<input type="checkbox"/> Assessment to gather feedback or implementing support and needed improvements established	<input type="checkbox"/> Compliance of Registration resources from BCC	<input type="checkbox"/> Assessment 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 <b>REQUIRED</b>	
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 labor interventions			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 learning of immediate discharge	<input type="checkbox"/> Plan developed for training direct care providers	<input type="checkbox"/> Plan developed for training "trusted" care providers	<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 learning 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 cesarean 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](http://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



Use the time you have to:

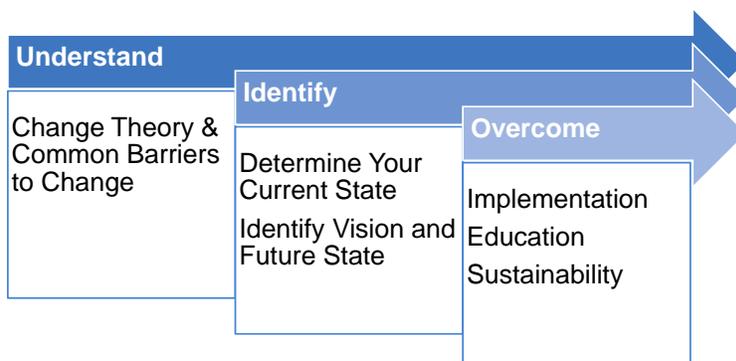
- \* Slow down and listen
- \* Discover what is already happening
- \* Make people curious

- \* It feels like we are getting nowhere



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

## Navigating the Challenges of Becoming Baby-Friendly



National Institute for Health , 2007



Let us help you!

Linda Young  
Kristina Niedra

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Growing a Baby-Friendly Ontario!

A blue banner at the top of the slide contains the text "Let us help you!". Below this, the names "Linda Young" and "Kristina Niedra" are listed on the left, and their email addresses "lyoun@tegh.on.ca" and "knied@tegh.on.ca" are listed on the right. Below the banner, there are five grey silhouettes of a baby in various stages of development: lying down, crawling, and standing. At the bottom of the slide, the text "Growing a Baby-Friendly Ontario!" is written in blue.