Kids First Perth Breastfeeding Group received funding from Best Start-Health Nexus with the Perth District Health Unit as lead for a multi-faceted community breastfeeding project

Project Components:
- Health Care Provider education including all FHT staff
- Community agency education
- Breastfeeding Buddies
- Anytime/Anywhere Campaign

Kids First Huron Perth
Consortium of over 60 agencies and professionals committed to providing an integrated system of prenatal, healthy child development, early ID and intervention, and early learning and care for children under the age of six and their families
**Kids First Perth Breastfeeding Group**

**Membership:**
- Ontario Early Years (2)
- Midwifery (2)
- Family Health Teams (3) and Registered Dietitian (1)
- Hospitals (2)
- Private Breastfeeding Consultants (3)
- Doula (1)
- Perth District Health Unit (2)
- Parent (1)

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**Education for Health Care Providers**

Contracted 0.2 FTE RN/LC from one Family Health Team (FHT) to be the lead for this component of the project Mar-Oct

**Rationale:**
- Credible source for breastfeeding information and support
- Other FHTs would be more receptive to a fellow FHT nurse
- Act as lead contact for other FHTs
- Largest FHT and the closest in proximity to health unit
- Assigned to the FHT and not a GP which allowed flexibility

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**Education for Health Care Providers**

- Formed a sub-committee of Kids First Perth Breastfeeding Group
- Representation from 3 of 4 FHTs on our group
- Recruited RN from remaining FHT

**Role of FHT Representatives was to:**
- Champion breastfeeding within their FHT
- Liaise with staff and provide insight into FHT operations
- Assist with development and implementation of the HCP Environmental Scan
- Identify and remove BFI non-compliant materials using PDHU BFI Resource Checklist
- Provide input into and manage the logistics for the breastfeeding education sessions
Environmental Scan

1. What professional references do you access to provide breastfeeding information for your patients?
   - Motherisk
   - Canadian Paediatric Society/PDHU website
   - UpToDate©

2. What breastfeeding handouts/resources do you provide to your patients from prenatal to 6 weeks postpartum?
   - PDHU – Your Guide to a Healthy Pregnancy
   - Today’s Parent Magazine
   - PDHU – Your Guide to a Healthy Newborn

3. Are you interested in attending a session on current research and best practices related to breastfeeding?
   - Majority of respondents indicated interest

Education Sessions Planning

- Explored with FHT reps options for breastfeeding education (length, presenter, location, cost)

Considerations:
- CME credits-preferred, not feasible
- Budget (speaker, food, in-kind)
- Speaker credibility (Dr. Lisa Graves)
- 8 FHT sites - on site preferred
- Time constraints - majority requested 1 hr
- Space and AV equipment needs

Education Sessions - Implementation

- PDHU Leads developed presentations - input from FHT reps and 2 physician champions (paediatrician and GP)

Key Messages:
- Populations with lower rates of breastfeeding
- Importance of breastfeeding and the risk of formula
- Health Canada infant feeding recommendations
- Medical indications for supplementation
- Perth County surveillance data
- Best practices - informed decision making, resources
- Role of FHT related to breastfeeding
- Community supports and services, early referrals (HBHC)
- Shared the Anytime/Anywhere campaign resources
Education Sessions - Evaluation

- Created post education session evaluation
- Physician attendance: 32/46
- Staff attendance: FHT RN/RPN, Nurse Practitioners, Dietitian, Executive Directors, Administrative Staff, Lab Student, Hospital RNs
- Evaluation responses: 42

Evaluation Questions:
1. Overall, how satisfied were you with the:
   a) Quality of information delivered (98% - satisfied/very satisfied)
   b) Presentation style (100% - satisfied/very satisfied)

2. How relevant were the topics to your work?
   a) Breastfeeding recommendations (86% very relevant/relevant)
   b) Medical reasons for supplemenations (81% very relevant/relevant)
   c) Breastfeeding surveillance (81% very relevant/relevant)
   d) FHT environmental scan results (79% very relevant/relevant)
   e) Infant feeding: informed decision making (86% very relevant/relevant)
   f) Community breastfeeding resources (84% very relevant/relevant)

3. What was the most important piece of information that you learned from this presentation?
   - Community resources and supports (overwhelmingly)
4. How do you plan to apply this new learning?
   a) In my day-to-day work (69%)
   b) In my team/department meetings (31%)
   c) My external committee or partners (12%)
   d) In my personal life (14%)
   e) I am already applying some of the strategies discussed (12%)
   f) Other, please specify (10%: administrative staff)

5. Do you have suggestions for additional breastfeeding learning needs?
   > Very minimal responses

Successes:
- Strengthened the importance of breastfeeding and the need to enhance services
- Recognition of joint ownership for ensuring breastfeeding supports (partnership meetings)
- Ongoing collaboration between the FHT reps to meet, discuss and share BFI implementation strategies (policy development and resources)
- Physician champion support
- Allied HCP support increased

Successes:
- Opportunity to share other components of the Best Start-Health Nexus project with FHTs

Anytime/Anywhere Campaign:
- 5 Perth County moms
- Posters, videos, cut-outs
- Reference Cards
- Instagram, Twitter
- Community Breastfeeding Events

Breastfeeding Buddies:
- New graphic design images
- Closed facebook page

www.i-breastfeed.ca
Lessons Learned:

- Need for community development skills that may not be found with FHT nurses
- Perception that BFI supports breastfeeding only and is not inclusive of formula feeding
- Continuing education is challenging given time and financial constraints within FHT. Opportunities need to be accessible and feasible
- Maintain the momentum of the Anytime/Anywhere campaign

Acknowledgements

Stratford Family Health Team
- Kaitlyn Hartung RN BScN
- Andrea Thompson RN BScN IBCLC

Sarnia Family Health Team
- Adrienne Veenstra RD
- Teresa Borelli RN BScN MNS

North Perth Family Health Team
- Ruth Anne Banks RN BSc

Happy Valley Family Health Team
- Mary Lou McCarthy RN

Dr. Kirsten Blalock, Paediatrician
Dr. Grace Langford, MD