

The Baby Friendly Initiative and Health PEI Infant Feeding Policy



Prepared by: Baby Friendly Initiative Steering Committee October 2016 (Updated April 2017)

Presentation Overview

- 1. Benefits of breastfeeding
- 2. The Baby Friendly Initiative (BFI)
 - The Breastfeeding Committee for Canada (BCC) Integrated Ten Steps
 - WHO International Code of Marketing of Breast Milk Substitutes
- 3. Working toward BFI status in PEI
- 4. Health PEI Infant Feeding Policy
 - Achievements & Next steps
- **Health** PEI

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BENEFITS OF BREASTFEEDING

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https://www.youtube.com/watch?v=k-BmGFBSVWM



- Breastfed babies require fewer doctors' visits and hospitalizations resulting in lower health care costs.
 - Each additional month of exclusive breastfeeding may reduce hospital admissions secondary to infection by as much as 30% in the first year of life.
 - Formula-fed infants experience 3 times more severe respiratory illnesses compared with infants who had been exclusively breastfed for 4 months.



• Breast milk is associated with enhanced performance on neuro-cognitive testing.

 Adolescent and adult obesity rates are reduced by 15% to 30% if any breastfeeding occurred in infancy when compared with no breastfeeding.



- Infants who exclusively breastfeed for at least 3 months have been found to have...
 - A reduction of up to 30% in the incidence of Type 1 Diabetes.
 - A reduction of 40% in the incidence of Type 2 Diabetes.
 - Possibly reflecting the long-term positive effect that breastfeeding has on weight control and feeding self-regulation.



- For moms:
 - Decrease in the incidence of breast and ovarian cancers.
- For families:
 - It is economical!
 - For a family in Ontario receiving Ontario Works subsidy, formula can cost a family up to 54% of the family's available income





BABY FRIENDLY INITIATIVE (BFI)

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About BFI

- Initiated by WHO and UNICEF in 1991
- BFI is based on:
 - The WHO Ten Steps to Successful Breastfeeding (1989), referred to as the BCC Integrated 10 Steps
 - Innocenti Declaration (1990)
 - WHO International Code of Marketing of Breast Milk Substitutes (1981)



About BFI

• Objective:

To improve outcomes for mothers and babies by enhancing the quality of their care and enabling them to make informed choices around infant feeding.

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About BFI

- 20,000 Hospitals world wide have achieved BFI designation, only 500 are in industrialized countries.
- In Canada, there are 123 BFI designated Health authorities/centers (95 are in the province of Quebec).
- See below for the complete list:
 - <u>http://www.breastfeedingcanada.ca/documents/Designated%</u> 20facilities%20in%20Canada%20(November%202015).pdf



The BFI Guiding Principles

Informed decision-making.

- Promoting and sharing evidence-based and best practice.
- Supporting breastfeeding across the continuum of services through collaboration.
- Working toward empowerment and public participation.

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BFI Benefits

- Excellence in family-centered care
- Ethical care
- Quality assurance meet international standards
- Increased client satisfaction
- Increased staff satisfaction and retention

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How to Achieve BFI Status

- Ensure the BCC Ten Steps are being followed.
- Ensure the WHO Code is being followed.
- A self-assessment is completed by organization.
- The formal accreditation process is undertaken by the BCC.



The BCC Ten Steps

- The minimum standard of care for newborn infants including:
 - Infant Feeding Policy
 - Education and training for staff, physicians, volunteers
 - Pregnant women and new moms are provided with information and support to help them make informed choices about infant feeding.
 - Information about the importance of breastfeeding
 - Support for all forms of infant feeding
 - Skin-to-skin contact
 - Initiation of breastfeeding

Click <u>here</u> to access the BCC Ten Steps summary document
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WHO International Code of Marketing of Breast-Milk Substitutes (the WHO Code)

• What is the WHO Code?

- The World Health Assembly adopted the International Code of Marketing of Breast-Milk Substitutes in 1981 to protect and promote breastfeeding, through the provision of adequate information on appropriate infant feeding and the regulation of the marketing of breast-milk substitutes, bottles and artificial nipples (UNICEF, 2012).
- A handful of countries have adopted the Code as law. To date, Canada has only made a few of the provisions law.
- Seeks to protect breastfeeding by ensuring the ethical marketing of breast-milk substitutes by industry.
- Click <u>here</u> to access the summary and <u>here</u> for the full document
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How to be WHO Code Compliant?

- The Code includes the following provisions that must be followed:
 - No advertising of products within the scope of *The Code* to the public (breast-milk substitutes, bottles, soothers and artificial nipples).
 - No promotion of these products in health care facilities.
 - No free samples given to mothers.

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How to be WHO Code Compliant?

- No company representatives to advise mothers.
- No gifts or personal samples given to health workers.
- No words or pictures idealizing artificial feeding, including pictures of infants, on the labels of products.
- Information provided to health care workers should be scientific and factual.

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How to be WHO Code Compliant?

- All information on artificial infant feeding, including the labels, should explain the benefits of breastfeeding and the costs and hazards associated with artificial feeding.
- Unsuitable products, such as sweetened condensed milk [and evaporated milk] should not be promoted for babies.
- All products are of a high quality and take account of the climatic and storage conditions of the country where they are used.

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Source: World Health Organization, 1981 One Island Health System



WORKING TOWARD BFI DESIGNATION IN PEI

Achievements and Next Steps

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The Path to BFI Designation

- Policy Statement (2012) from Department of Health and Wellness regarding infant feeding.
- Establishment of BFI Steering Committee to operationalize policy statement.
- Engagement with stakeholders: staff, physicians, volunteers, and leadership committees.

The Path to BFI Designation

- Development of Health PEI Infant Feeding Policy.
- Endorsement of the Policy by the Health PEI Senior Management Group.
- Implementation of the Health PEI Infant Feeding Policy on October 1st 2016.

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HEALTH PEI INFANT FEEDING POLICY

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The Infant Feeding Policy

- BFI Steering Committee developed the Health PEI Infant Feeding Policy.
 - Implementation date: October 1, 2016
 - Click <u>here</u> to access the Policy



The Infant Feeding Policy Supports:

- Development and implementation of systems that create a culture conducive to breastfeeding.
- Implementation of the BFI initiative.
- Adoption of evidence-based practices for the provision of quality, person-centered care related to infant feeding.
- Recommendations for education for staff, physicians, and volunteers.
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Infant Feeding Policy Statement

Health PEI administration and 1.1 management in acute care and community health shall promote a philosophy of maternal and infant care which advocates breastfeeding and supports the normal physiological functions involved in this maternalinfant process through the implementation of the BFI. Health PEI One Island Health System



NEXT STEPS

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Next Steps: BFI Steering Committee

- Inform managers of requirements to be in compliance with the <u>Health PEI Infant</u> <u>Feeding Policy</u> & the <u>WHO Code</u>.
- 2. Develop a **BFI Toolkit** for the Staff Resource Centre.
- 3. Conduct a current state analysis of Health PEI programs and facilities.

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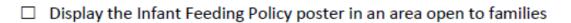
The BFI Toolkit

- Will be available on the Staff Resource Centre: <u>http://www.healthpei.ca/src/tgtk</u>
- Contents:
 - This presentation
 - All documents discussed
 - Breastfeeding Protocols

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Next Steps: Managers

Infant Feeding Policy Checklist for Managers



- Display the Infant Feeding Policy poster <u>and</u> some brochures in staff areas
- Have all staff review the Infant Feeding Policy
- Ensure all staff are aware of the International Code of Marketing for Breastmilk Substitutes, and the BCC Integrated 10 Steps & WHO Code Practice Outcome Indicators for Hospitals and Community Health Services Summary (links provided in the email message)
- Encourage staff to complete the appropriate minimal and ongoing education requirements (see the document – Education Requirements for Physicians, Staff, and Volunteers)
- Maintain a record of education completed by you and your staff

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Next Steps: Staff, Physicians, Volunteers

- Education at a level appropriate to their role in caring for pregnant women and mothers.
 - Direct care:
 - those who provide breastfeeding assessment, support, and intervention
 - 20 hours of education
 - within 6 months of hire

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TABLE 1.	DIRECT CARE
Suggested practitioners	Those who provide breastfeeding assessment, support and intervention <i>Examples: Mother-baby units, pediatric units, public health nursing, primary care</i>
Physicians (2 options for direct care education)	 Option 1: Latching On: How Family Physicians Can Support Breastfeeding Patients Free online module, UBC Faculty of Medicine CPD (1.0 Mainpro+) To register: http://ubccpd.ca/course/breastfeeding-fp Option 2: Step 2 Education ES03: Breast Feeding Essentials for Doctors Online course (\$72, 4hrs) Complete the registration form found on the Staff Resource Centre.
Nursing staff	Step 2 Education ES01: Breastfeeding Essentials (for staff who are caring for mothers during pregnancy, birthing and for the duration of Breastfeeding) Online course (\$72, 20 hours) To register, complete the registration form on the Staff Resource Centre. Please note For this staff group, at least 3 hours of supervised clinical instruction is strongly recommended in addition to the ES01 course.



ALSO AVAILABLE ON THE STAFF RESOURCE CENTRE:

- Additional courses (registration available through Health PEI form on the Staff Resource Centre).
 - Course descriptions can be found at:
 - Step2 Education: <u>https://step2education.com/courses.html</u>
 - Health e-Learning: <u>https://www.health-e-</u>

learning.com/en/courses/breasted

- Free resource from Toronto Public Health:
 - Breastfeeding Protocols for Health Care Providers (2013) (will be available in the BFI Toolkit).
 - Breastfeeding E-Learning Modules

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Next Steps: Staff, Physicians, Volunteers

In-direct care:

- those who provide secondary or supportive care to mothers and babies
- are interested in learning more about breastfeeding and how to support pregnant women and mothers



TABLE 2.	IN-DIRECT CARE
Suggested practitioners	Those who provide secondary or supportive care to mothers and babies.
Physicians	But I Don't Do Maternity Care! Specialist Physician Management of the Breastfeeding Patient Free online module, UBC Faculty of Medicine CPD (0.25 Mainpro+) To register: http://ubccpd.ca/course/breastfeeding-sp
Nurses, Allied Health Professionals, Volunteers	 Step 2 Education ES05: Breast Feeding Essentials for Allied Health Online course (\$36 per person, 8 hours) To register, complete the registration form on the Staff Resource Centre.

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Next Steps: Staff, Physicians, Volunteers

- Non-clinical contact:
 - Staff and volunteers who come into contact with mothers and babies but do not provide breastfeeding education or support



TABLE 3.	NON-CLINICAL CONTACT WITH MOTHERS AND BABIES
Suggested practitioners	Those who come into contact with mothers and babies but do not provide them with breastfeeding education or support.
Non-clinical staff & volunteers (2 education options)	 Option 1: Step2 Education ESO4: Breastfeeding Essentials for Ancillary Staff (Short Presentation) Free online module (10 minutes long, can be viewed as a group). Registration is not required to view the module, however to obtain a certificate of completion, you do need to register by completing the registration form found on the Staff Resource Centre. Option 2: Healthy Mothers, Healthy Babies Breastfeeding Free online course, Best Start Ontario (3hrs) To register: http://www.beststart.org/courses/login/index.php

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...thank you for your time and support...



comments or questions?

babyfriendlynl video: <u>https://www.youtube.com/watch?v=Yy31NAY3uSI&index=2&list=PLdvavEd0TC-LuI74X-tNKRCX9cGPoKwVc</u>



References

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