



National Baby-Friendly Quality Improvement Collaborative Project

Welcome and Orientation Webinar/Call

May 30 or June 6

Welcome and Thank-you!



Welcome to all 25 hospitals that have been selected to participate in the National Baby-Friendly Initiative Quality Improvement Collaborative.



Your willingness to step forward and participate demonstrates your commitment to innovatively leading evidence based quality care.



Thank you to the Public Health Agency of Canada for the funding support to make this project possible.



We are pleased to have the encouragement and support from:

Chief Public Health Officer of
Canada
Minister of Health
UNICEF Canada
Children's Healthcare Canada
Accreditation Canada



Parent
Partners

People Centred Care and quality improvement strategies are areas of focus in the revised World Health Organizations update of the Baby-Friendly Hospital Initiative (2018)



Parent Partners are participating in the Planning Team and will be actively support hospital Parent Partners on your BFI journey

Introduction and a welcome from Claire Gallant
and Candi Edwards

BFI and Breastfeeding

- Breastfeeding is an important, globally-recognized indicator of maternal child health
- Baby-Friendly Initiative provides the evidence based standards for facilities that provide maternity and newborn services to support and encourage new mothers to breastfeed successfully
- In Canada, only 21 hospitals have been designated Baby-Friendly
- 90% women initiate breastfeeding but only a third are breastfeeding exclusively at 6 months
- Disparities exist in breastfeeding rates across Canada

Scaling up BFI Implementation in Canada

National BFI QI
Collaborative Project with
25 participating hospitals

Focus on recruiting and
selecting hospitals serving
women with traditional
lower breastfeeding rates

The Purpose of the
National BFI QI
Collaborative:

Increase the number of
hospitals that fulfill the Ten
Steps to Successful
Breastfeeding

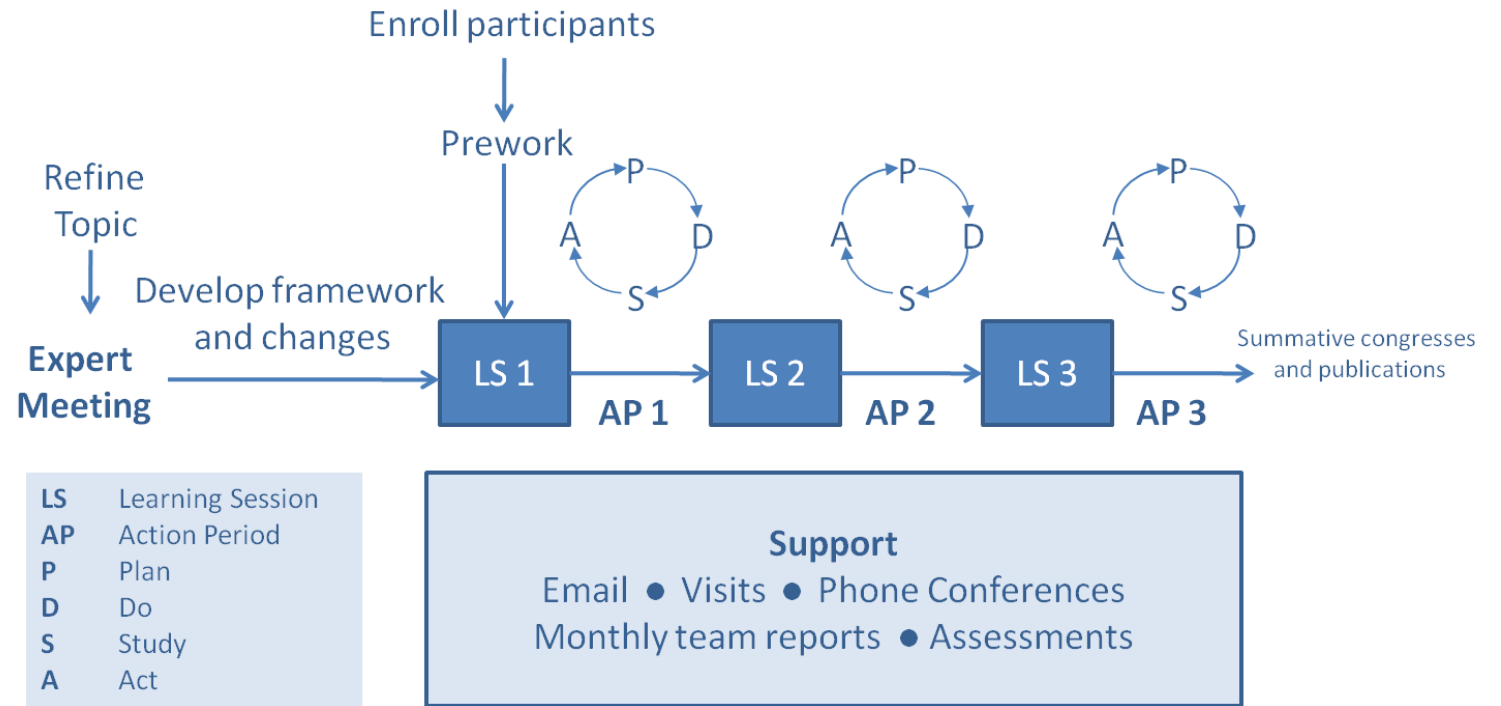
Increase the number of
hospitals that are
designated Baby-Friendly

Increase the number of
births that occur in a Baby-
Friendly hospital

Increase the breastfeeding
exclusivity rate during
hospital stay

Methods:

IHI Breakthrough Series™ Core Model



Preparing for a Breakthrough Series Collaborative:

- Planning Team: leading experts are preparing strategy to support the National BFI QI Collaborative Project
 - Welcome and Orientation Package
 - Evaluation Plan
 - Measurement strategy and Results Sharing Agreement
 - Workshop planning and QI supports

Breakthrough Series Model in Action

May 2019-June 2021 (30 month project)

Pre-work:

- Hospitals will identify their improvement team
- Assess baseline practice performance (BFI Self-Assessment tool)
- Secure local leader support
- Develop hospital specific time-limited aim statement aligned with the National BFI QI Collaborative
- Attend Measurement Strategy and data collection webinar June 17 or 19 1300 EST
- Review patient documentation and develop a plan to address gaps in data
- Attend Quality Improvement Basics Webinar July 18 or 25, 1300 EST
- Create Storyboard

Workshops and Action Periods

Workshops are key project meetings with focused content and quality improvement learning and sharing

- First workshop will be in Oakville, Ontario September 5 & 6

Action Periods are times for significant changes within the organization to accomplish project aim. Develop, test and implement evidence-based care practices

Measurement Strategy

Structural measure (annually)

- Self-assessment based on the [BFI Ten Steps and WHO Code Outcome Indicators for Hospitals and Community Health Services](#)

Outcome and process measures (monthly chart audits)

- Prenatal education
- Skin to skin vaginal and cesarean births
- Assistance with breastfeeding
- Rooming in/separation

Breastfeeding initiation or any breastfeeding

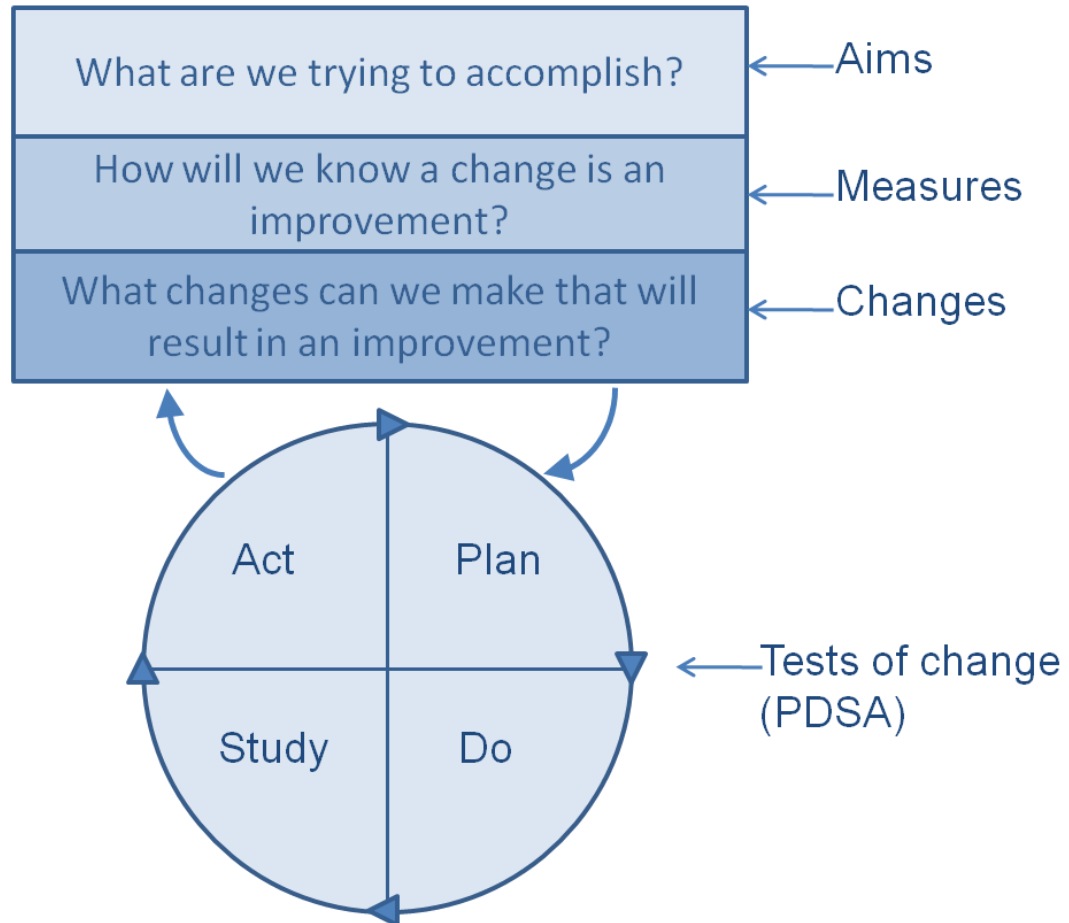
At discharge:

- Breastfeeding exclusively
- Breastfeeding supplementation for medical reason
- Breastfeeding supplementation for non-medical reason
- Formula feeding
- Education on cue-based responsive feeding, pacifier use/risks and community support

Process measure (patient and staff attestation through surveys-total of 3 times)

Results Sharing Agreement

- Only aggregate non-identifiable results will be collected using REDCap database (hosted in Nova Scotia)
- Results are for QI purposes and is not research
- A detailed Results Sharing Agreement will be approved with each hospital outlining:
 - Roles, responsibilities
 - How the results will be used and published
 - Confidentiality, Privacy and Security
 - Property rights, term and termination, and liability
- BCC Project Management Policy will outline the flow of results procedures



Key Drivers for improvement:

- Breastfeeding Policies and Procedures that promote the Ten Steps to Successful Breastfeeding
- Optimal staff competency (knowledge, skills, and attitudes)
- Evidence-based maternity care practices
- An organizational culture of quality and safety
- Comprehensive and effective EMR/Hospital documentation system
- “Champion for change” leadership
- Culturally Safe and People Centered Care
- Supportive Care Transitions
- Engaging partners across multiple disciplines and healthcare sectors

BCC Support

Monthly Action Period Calls

- Alternating between content-driven topics and discussions with coaching teams to overcome obstacles and accelerate improvement efforts. Teams will be expected to provide progress updates on their activities, share small wins, challenges and accomplishments

Mentoring Guidance and Support

- Mentors from National BFI QI Collaborative will be available to share experiences and learnings
- Technical Assistance and Support Calls will be offered to any team throughout the Collaborative period to discuss challenges, barriers, successes and/or to receive feedback and suggestions on possible direction with practice change

Data Reporting Assistance

- The National BCC Baby-Friendly Project Director and Faculty Improvement Advisor will be available to answer questions for teams with monthly data collection and submissions.

Hospital Team Requirement

Commitment of time and efforts to achieve National BFI QI Collaborative Project aims

Cumulative time commitment of four days/month

Meeting with hospital improvement team 2-4 times/month

Participation in the Leadership Track (Administrative Leaders)

Participation in the Parent Partner Network

All teach, all learn

Share learning with other hospitals across the provinces and territories

Pre-work Activities	Participants	Deadline	Supporting Materials
Step 1			
<input type="checkbox"/> Review Orientation Package <input type="checkbox"/> Review Breakthrough Series Model for Improvement	All Team Members	May 23, 2019	Orientation Package
Step 2			
<input type="checkbox"/> Formalize your team <input type="checkbox"/> Set team expectations <input type="checkbox"/> Review collaborative aim, and expectations with team	All Team Members	May 23, 2019	
<input type="checkbox"/> Register for Workshop 1	All Team Members	August 6, 2019	To Register click here
<input type="checkbox"/> Draft Team's individualized Aim Statement	All Team Members	Prior to Workshop 1	Refer to Aim Statement information on Pg. 20-22
Step 3			
<input type="checkbox"/> Participate in Measurement Strategy and Data Collection Meeting	Team Leads / Data Managers	June 17 or June 19, 1300 EST	Confirm attendance through TEAMS calendar meeting invite
Step 4			
<input type="checkbox"/> Complete/submit baseline data	Designated Team Data Manager	August 6, 2019	Details to follow later related to specific measures to collect
Step 5			
<input type="checkbox"/> Develop a Storyboard	All Team Members	August 30, 2019	Refer to Instructions on Pg. 24-25
Step 6			
<input type="checkbox"/> Attend Quality Improvement (QI) Basics Webinar	Review of MFI and BTS	July 18 or July 25 at 1300 EST	Confirm attendance through TEAMS calendar meeting invite

Summary of Webinars/Calls

Call	Participants	Date
Welcome Call	All team members	May 23 or May 30, 1300 EST
Measurement Strategy and Data Collection Meeting	Team Leads /Data Managers	June 17 or June 19, 1300 EST
QI 101 Webinar (attend 1 of 2)	All team members	July 18 or July 25, 1300 EST

Workshop 1

- Core BFI Improvement Team to attend:
 - Administrative Lead (Senior Management/Executive, Director, physician lead(s))
 - Nurse Manager/head nurse
 - BFI lead/nurse champion
 - Mother (not hospital staff) who has given birth at your hospital in the past 3 years
- Register for workshop ([click here](#)) and make your travel and accommodation arrangements
- Bring your completed BFI Self-Assessment and Aim statement (include any baseline data you already have available)
- Prepare Storyboard and share with Senior Leadership

Example of Individualize Aim Statement

- By June 30, 2021, we will improve our exclusive breastfeeding rate at discharge of the hospital stay from 40% to 75% (by 35 percentage points). We will achieve this by implementing evidence-based practices to provide better care to mothers and their infants who deliver at our hospital so that:
 - 75% of infants are fed only breast milk from birth to discharge unless medically indicated
 - 80% of staff caring for mothers and infants receive training on breastfeeding and lactation support
 - 80% of mothers receive prenatal information on the importance and management of breastfeeding
 - 80% of stable infants go skin to skin for at least one hour after delivery
 - 80% of breastfeeding mothers receive assistance and support with breastfeeding
 - 80% of stable infants room-in with mothers 24 hours/day

Develop a Storyboard



Name and location of your facility



Brief description of the facility



Collaborative team members (names, titles, roles)



Team's individualized aim statement (with numerical goals)



Number of annual births



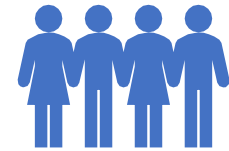
Results of your self-assessment and baseline data collection



Any changes that you have already made that have promoted breastfeeding

Communication

- Primary mode of communication within the Collaborative will be with Microsoft Teams (webinar, sharing resources and collaboratively supporting progress over time)
- Internal and Stakeholder communication will be important throughout the project
 - Identify key stakeholders that should know about this project
 - Obstetrics, Family Practice, Pediatric, Neonatology, Midwifery department meetings
 - Senior Leadership updates
 - Quality and Patient Safety
 - Marketing and Communications
 - Volunteers community groups, and Hospital Foundation





Questions