

Interprofessional Theory As A Key Approach To The BFI

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**I have no conflicts of interest
to declare.**

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“Interprofessional Education occurs when two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes”
(WHO, 2010)



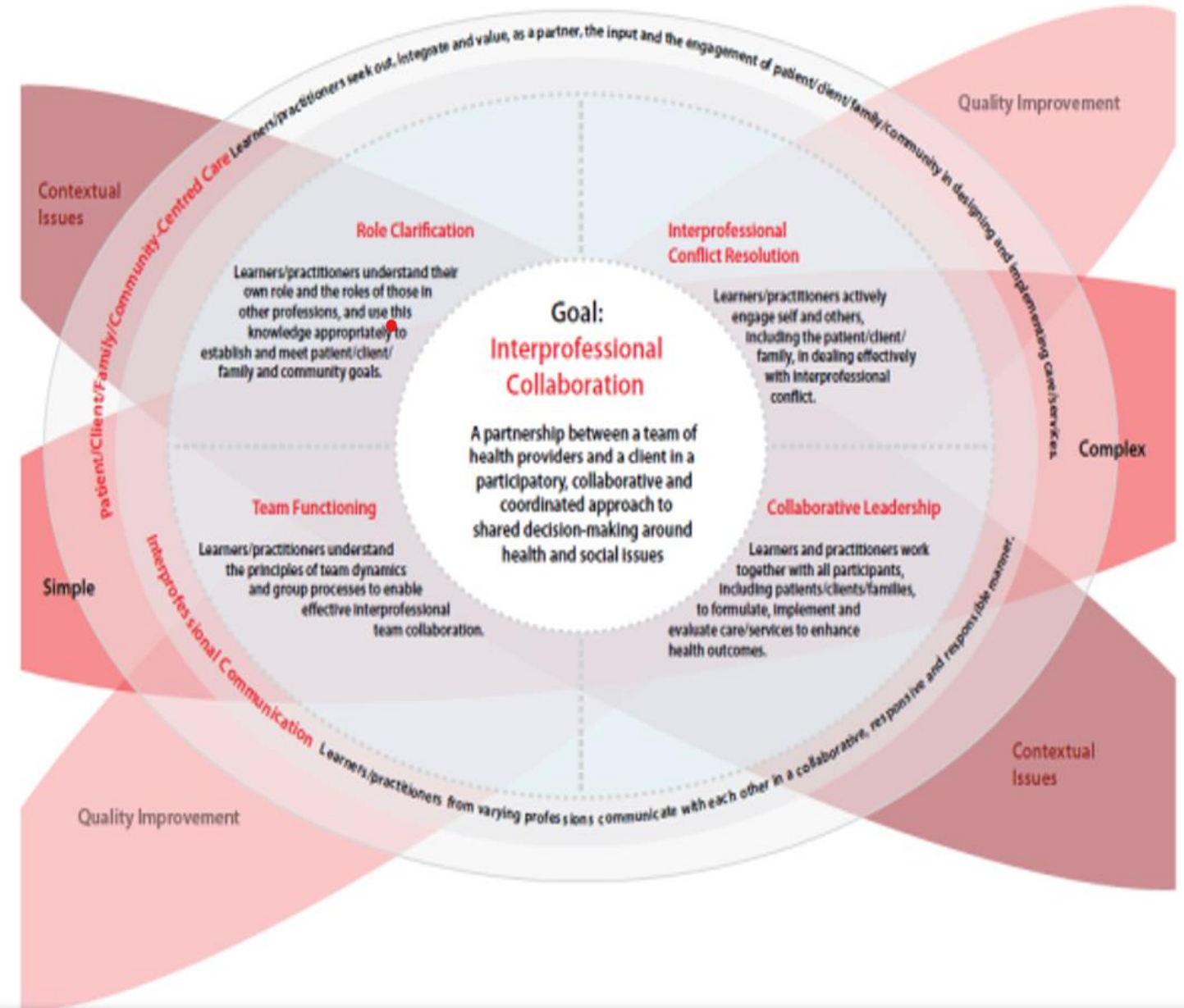
Effective Interprofessional Collaboration.

The following 6 competency domains:

- Role Clarification
- Team Functioning
- Patient/Client/Family/Community-Centred Care
- Collaborative Leadership
- Interprofessional Conflict Resolution

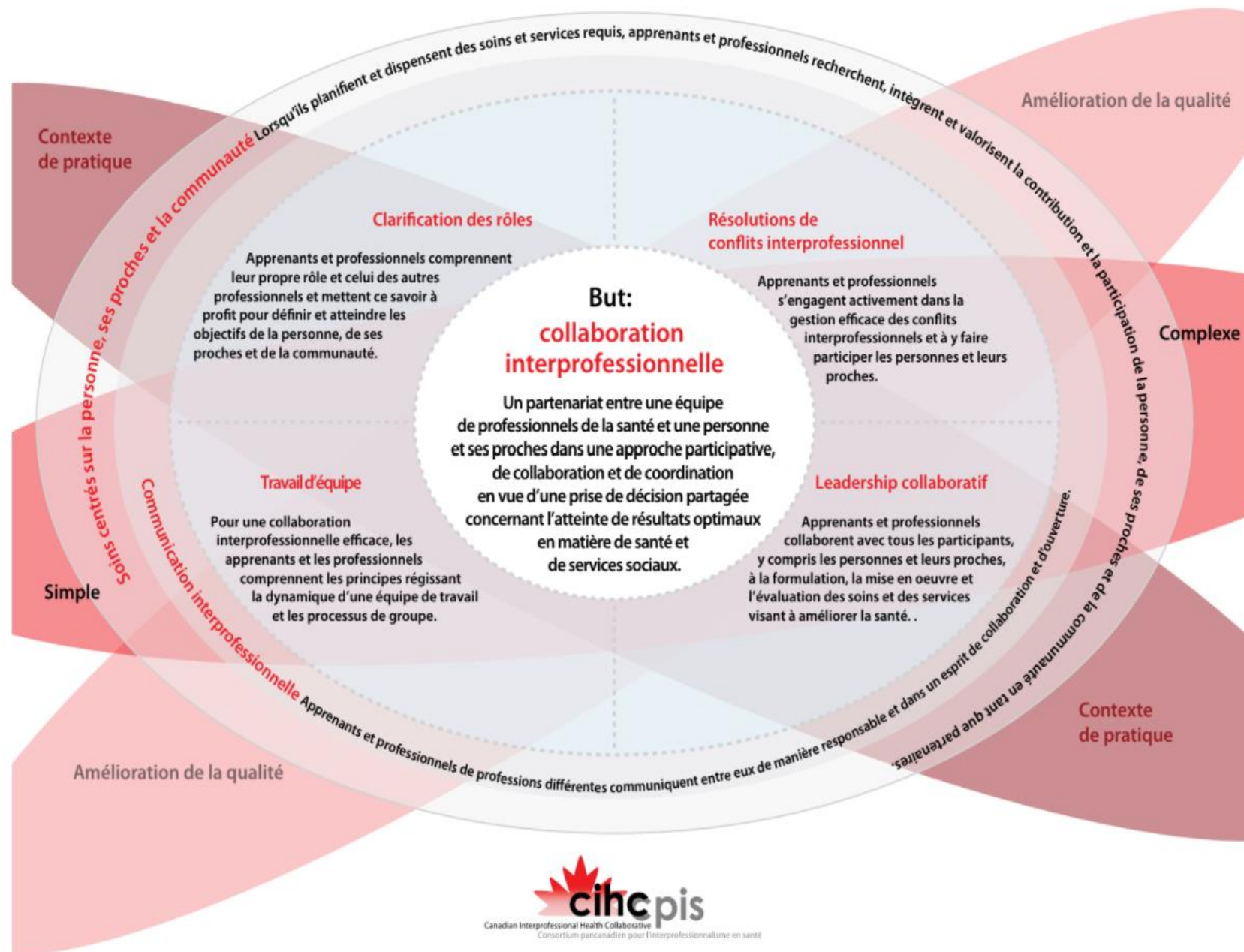
Canadian Interprofessional Health Collaborative, 2010

The following diagram represents the configuration of the six domains and highlights three background considerations that influence how the competency framework may be applied in different situations.



Le diagramme qui suit illustre l'agencement de ces six domaines et met en évidence trois éléments contextuels qui influencent la manière dont le référentiel de compétences peut s'appliquer à différentes situations.

Référentiel national de compétences en matière d'interprofessionnalisme



Theory Burst

Interprofessional Care

- Complications
- Adverse events
- Length of stay
- Re-admissions
- Mortality rates
- Patient satisfaction
- Staff satisfaction
- Staff turnover



**Which staff / stakeholders
can support/influence best
practice and quality of
care?**



The Team

- ☐ Physicians
- ☐ Nurses
- ☐ Lactation Consultants
- ☐ Midwives
- ☐ Dieticians
- ☐ Occupational therapists
- ☐ Physiotherapists
- ☐ Pharmacists
- ☐ Dentists
- ☐ Psychologist+ Psychiatrists
- ☐ Social workers
- ☐ Speech & language pathologist

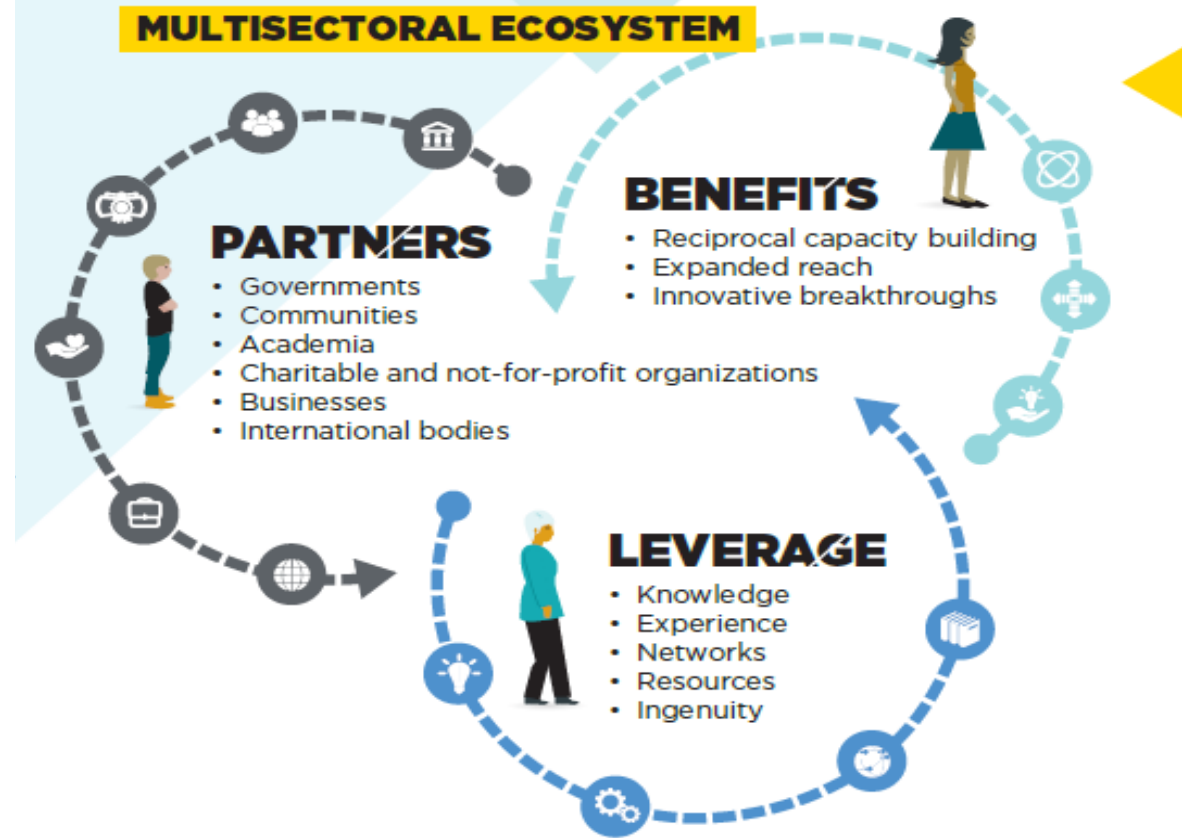
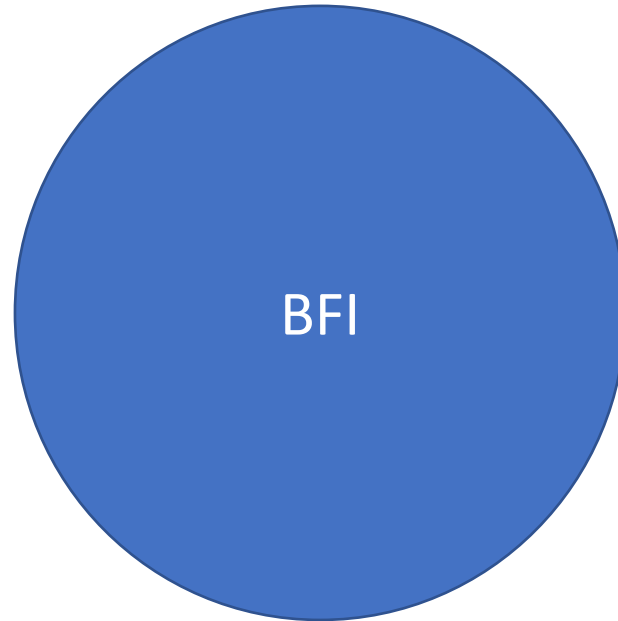
- ☐ Physician assistant
- ☐ Medical radiology student
- ☐ Phlebotomists
- ☐ Radiologist
- ☐ Public Health Partners

- ☐ Parent Partners
- ☐ Peer Support Groups
- ☐ Security
- ☐ Housekeeping
- ☐ Volunteers
- ☐ Others?



What have we learned?

- The multidisciplinary committee must include upper level management
- Get the Initiative on every agenda as a standing item to ensure regular reporting
- We need everyone – include the critics!
- A quality improvement approach works



ÉCOSYSTÈME MULTISECTORIEL

PARTENAIRES

- Gouvernements
- Collectivités
- Milieu universitaire
- Organismes de bienfaisance et sans but lucratif
- Entreprises
- Organismes internationaux

AVANTAGES

- Renforcement réciproque des capacités
- Portée élargie
- Percées innovatrices

INFLUENCE

- Connaissances
- Expérience
- Réseaux
- Ressources
- Ingéniosité



Baby-friendly Hospital Initiative Implementation guidance Updated, 2018



Breastfeeding
Committee
for Canada



Comité
canadien pour
l'allaitement

Ten Steps to Successful Breastfeeding

Critical management procedures

1. Facility policies:
 - a) Code of marketing
 - b) Breastfeeding policy
 - c) Internal monitoring
2. Staff competency

Key clinical practices

3. Antenatal information
4. Immediate postnatal care
5. Support with breastfeeding
6. Supplementation
7. Rooming-in
8. Responsive feeding
9. Feeding bottles, teats and pacifiers
10. Care at discharge



Where to Start?

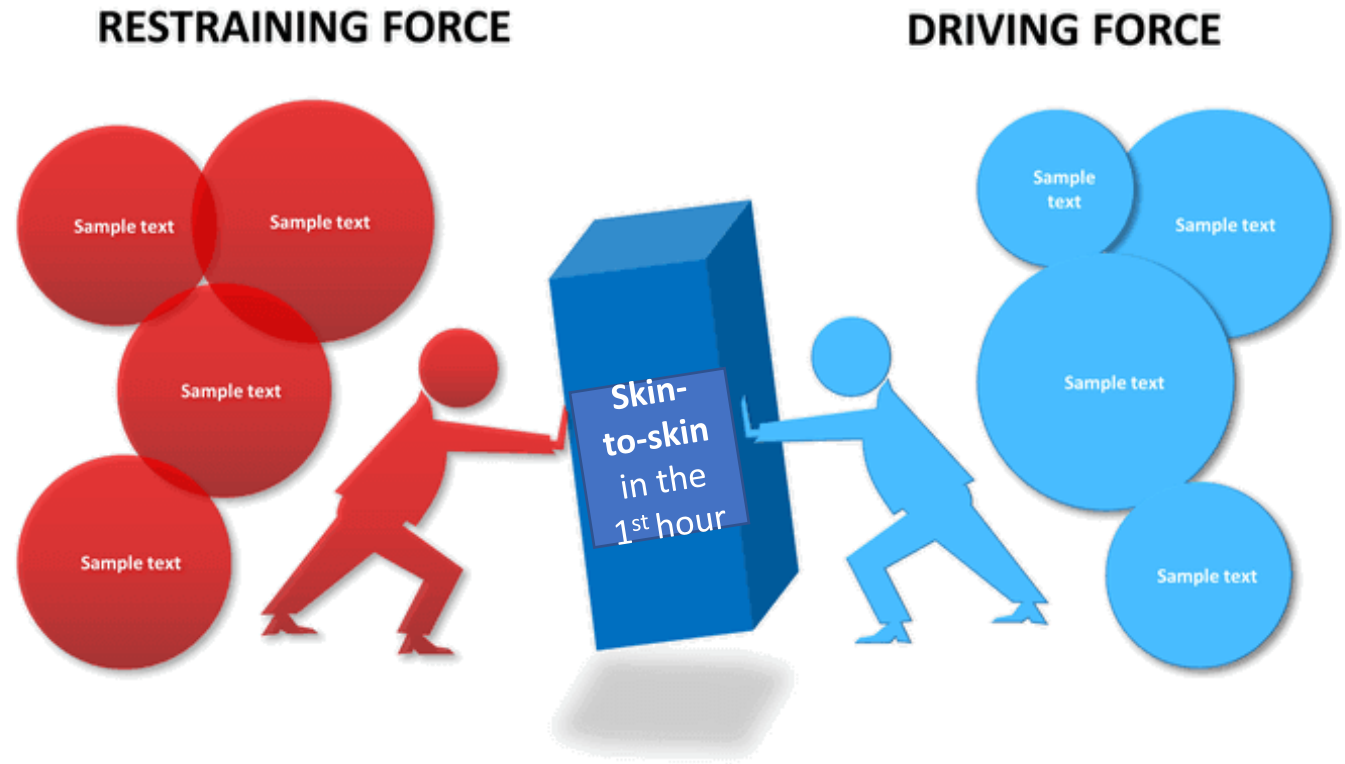
[‘New’ BFI Implementation Guideline](#)

[BFI process and costs](#)

[BFI Assessment Process Summary](#)

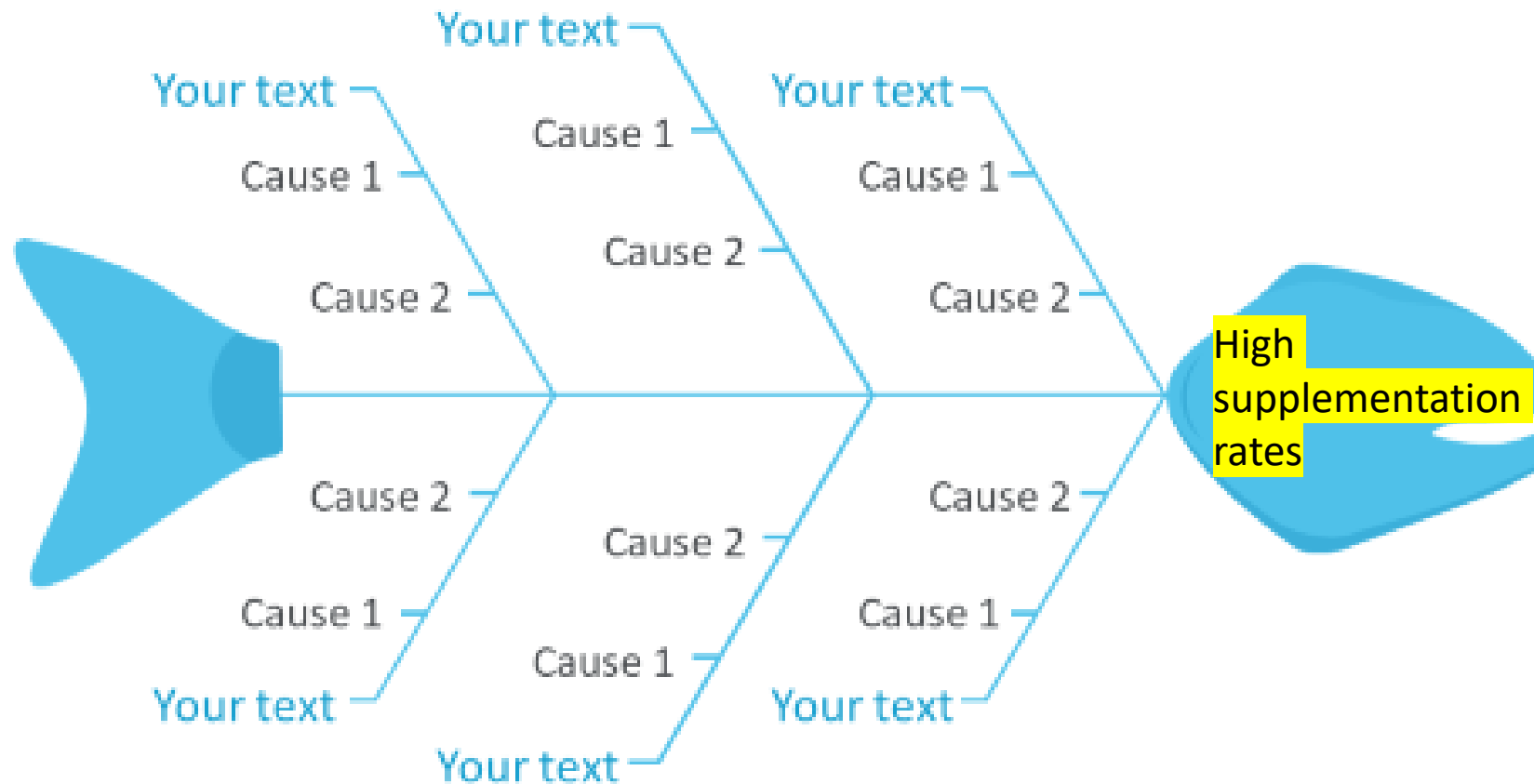
FORCE FIELD ANALYSIS

Identify
strengths and
weaknesses



Tackle the issues one at a time

Fishbone Diagram



Evaluation

- The BFI Guideline Checklist
- BFI Standards and Monitoring Recommendations
- External assessment for BFI designation



Thank you 😊

