



Ontario Breastfeeding Committee Newsletter

Volume 6: # 1: June, 2006

Registered Nurses Association of Ontario Accepts BFI Resolution.

The Ontario Breastfeeding Committee has as part of its logic model the objective to partner with professional organizations to bring the Baby Friendly Initiative™ (BFI) into practice and government policy. To this end it was a celebrated event when at the 2006 annual general meeting of the Registered Nurses Association of Ontario on April 28th, a resolution was presented on the BFI.

This resolution came about as the result of diligent collaboration between the various related interest groups under RNAO. These groups were the Childbirth Nurses Interest Group (CNIG), the Community Health Nurses' Initiatives Group (CHNIG), and the Pediatric Nurses Interest Group (PedNIG). The Ontario Breastfeeding Committee had input into the design and wording of the resolution with the help and support of the Breastfeeding Committee for Canada. The resolution also had the full support of the Ontario Public Health Association.

The resolution was passed by the RNAO membership with no voiced objections or challenges during the AGM.

Its passing points the way to join the RNAO resources and skills in lobbying the government with those of the OBC towards the implementation of BFI in Ontario health facilities, public health units and other community health services for the promotion, protection and support of breastfeeding as a key health initiative.

As part of this resolution, OBC will join with the RNAO to obtain government commitment and funding to

- Implement the policies and practices as listed in the 10 steps of BFI, the 7-Point Plan and the WHO Code in hospital, community and maternity and child health services.

[Cont. page 2](#)

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Thunder Bay District Health Unit is designated "Baby Friendly" - first Community Health Center in Ontario

On June 9 2006, after 5 days of scrutiny by a team of BFI Assessors lead by Ginette Belanger of Quebec, The Thunder Bay District Health Unit was designated "Baby Friendly".

This is the first Public Health Unit outside of Quebec to attain the required standards of excellence in breastfeeding protection, promotion and support and the first in Ontario.

The Ontario Breastfeeding
Committee extends sincere
congratulations.

In this Issue:

- 1 RNAO's BFI Resolution
Thunder Bay District Health Unit –
"Baby Friendly"
2. Peel Region Moves Forward
A Human Milk Bank for Ontario?
3. HMBANA
Breastfeeding Support In Ontario
Being Eroded
4. What's happening in Ontario?
Just for fun
5. Step by Step ... Step 10
6. News Flash – Quebec BFI
Notice Board

Cont. from page 1...

- Establish the position of a coordinator for BFI in Ontario, and
- Ensure breastfeeding support clinics are available across the province for breastfeeding families receive help when needed. Ontario Breastfeeding Committee members who are registered nurses are encouraged to join the RNAO and the named interest groups to share in this worthwhile endeavour.

It is a great opportunity to bring the Baby Friendly Initiative closer to common use in Ontario. Lori Levere.

Peel Region Moves Forward

In working towards achieving the Baby-Friendly Initiative, the Region of Peel Public Health Department developed a Baby-Friendly Initiative (BFI) education process. The Region of Peel purchased registrations for an on-line breastfeeding course, Ten Steps to Successful Breastfeeding: An 18 Hour Interdisciplinary Breastfeeding Management Course, published by Jones and Bartlett, 2003 from the United States. Each Family Health Public Health Nurse (PHN) is required to complete this on-line breastfeeding course. As the on-line course has significant American content, each PHN was provided with a package integrating Canadian statistics, professional organizations and policies. In addition, each PHN is required to complete a clinical component. The clinical component takes place at Region of Peel Public Health Department breastfeeding clinic sites. It consists of the PHN demonstrating correct position and latch and teaching a mother how to hand express breast milk. The PHNs are provided the opportunity to observe positioning, latching and hand expression prior to being assessed by one of the PHNs on the breastfeeding teams. PHNs that have successfully completed an 18 Hour Breastfeeding Course from a community college, INFACT Canada or equivalent, in the last 5 years were exempted from the course. Initially there were 147 PHNs participating in the BFI education process from April 2005 to May

2006. 135 PHNs registered for the on-line course: 100 permanent and 35 casual staff. 12 PHNs were exempted. 98% of the permanent staff and 93% of the casual staff completed the on-line course within the proposed guidelines. 93% of the permanent staff and 60% of the casual staff completed the clinical component.

The breastfeeding education for new PHN hires has been included in the orientation process. New PHN hires are encouraged to complete the on-line course within their first 3 months and their clinical component within the first 6 months.

The evaluation of the breastfeeding education is an ongoing process. For the most part the feedback from the staff has been positive.

The Breastfeeding Education Group (PHNs specializing in breastfeeding) has the responsibility for overseeing the process and providing regular updates. For further information you may contact the following:

Cindy Johnston

cindy.johnston@peelregion.ca

Sandy Bates, sandra.bates@peelregion.ca

Mara Celmins, mara.celmins@peelregion.ca

A Human Milk Bank For Ontario?

The babies of Ontario especially those who are ill or premature, deserve to have the option of pasteurized donor milk available to them when their mother's own milk is unavailable.

The abundance of research available provides clear guidelines for the use of human milk as "the preferred feeding for all infants, including premature and sick newborns, with rare exceptions." American Academy Of Pediatrics Work Group On Breastfeeding: Breastfeeding And The Use Of Human Milk.

The Ontario Breastfeeding Committee absolutely supports the proposed establishment of a human milk bank and would like to extend best wishes and hopes that this will come to speedy fruition.

***Human Milk Banking Association
of North America***
<http://www.hmbana.org>

The Human Milk Banking Association of North America (HMBANA) is a multidisciplinary group of health care providers that promotes, protects, and supports donor milk banking. HMBANA is the only professional membership association for milk banks in Canada, Mexico and the United States and as such sets the standards and guidelines for donor milk banking for those areas.

It was founded in 1985 to:

- Develop guidelines for donor human milk banking practices in North America
- Provide a forum for information sharing among experts in the field on issues related to donor milk banking
- Provide information to the medical community regarding use of donor milk
- Encourage research into the unique properties of human milk for therapeutic and nutritional purposes
- Act as a liaison between member banks and governmental agencies
- Facilitate communication among member banks to assure adequate distribution of donor milk
- Facilitate the establishment of new donor milk banks in North America using HMBANA standards.

This website is designed to provide information on milk banking and how to contact a milk bank to donate milk or to order donor human milk. This site is also a resource for health care providers and others who are looking for information on HMBANA's resources and services.

Contact: [Angela Bergevin](mailto:Angela.Bergevin@firstpointresources.com)
(abergevin@firstpointresources.com)
Phone: 919-861-4530.

**Breastfeeding Support In Ontario
Being Eroded - One Community's
Efforts**

The Brant Lactation Consultant Working Group formed in January 2005 to try to stop the closure of the Breastfeeding Clinic at Brantford General Hospital. Initially the campaign involved writing letters to the hospital and letters to the editor. The hospital's response was that there was adequate breastfeeding support in the community through La Leche League and Public Health's Healthy Babies Healthy Children Program, thus the clinic was implied to be a duplication of service. Public Health in Brantford holds the position that having a Breastfeeding Clinic with Lactation Consultant services is not a part of their mandate, so when the clinic closed, they increased the hours of their 'Room To Grow' programme, an infant development assessment drop in, and reiterated the HBHC nurses are available for breastfeeding support, but did not protest the closure, nor try to provide Lactation Consultant Services to fill the gap.

Breastfeeding Clinics are at risk all across this province as hospitals try to tighten their budgets. Brantford was the first, but subsequently, two clinics in Toronto, one in Guelph and one in Sarnia have closed and more are slated for potential closure.

The Brant Lactation Consultant Working Group, prior to the closure, attempted to solicit community partnerships to find a new home for the Breastfeeding Clinic. Space was secured at the Early Years Centre and donations of equipment and supplies were received, but no funding for the cost to administer the program or to pay the salary of a Lactation Consultant. In this process the group met with City Council, local MPP, and other community partners. The next move was to target the province to have them step in and help in Brant County.

In the fall of 2005 the group began a huge post-card campaign directed at George Smitherman, Minister of Health, and Mary Anne Chambers, Minister of Children and Youth Services.

Thousands of post-cards protesting the loss of the LC in Brant County rolled into their offices, and locally

[Cont. Page 4](#)

Cont. from page 3...

the campaign received excellent radio and newspaper press. The Group has broadened the focus and are currently targeting the Ontario Government to take a leadership role in ensuring the provision of publicly accessible Lactation Consultant services to women across the province.

A Lactation Consultant Expo was held in April 2006 to give a forum for people to voice their opinions and to educate people about LCs. At the expo a letter writing and petition signing station were available, also, a version of 'Speaker's Corner' where messages for Minister Smitherman were video-taped. Door prizes and two free breastfeeding clinics were held - the turnout was phenomenal.



All levels of local government came out to show support for this cause, and to encourage the Group to keep up the political pressure. Dave Levac MPP spoke passionately and with understanding of the issues. He reiterated his commitment and agreed to bring the petitions, letters and sentiments forward to the Province.

Mayor Mike Hancock and Counsellor Marguerite Ceschi-Smith spoke in support of having Lactation Consultant services back in Brantford, and Mayor Hancock presented the Group with a letter showing council's strong support of their efforts. Mayor Hancock stated "From the city's perspective we strongly support a Lactation Clinic here in Brantford."

The next push is for action around Canadian Breastfeeding Week, October 2006, when the petition to the Ontario Legislature, and messages to Minister Smitherman will be presented.

For more info contact
Kelly Gascoigne 519-751-6444

What's happening in Ontario? We want to hear from you!



Dear OBC members, you will soon receive reminders to renew your membership. The organization needs your continued support to maintain the website and to promote the Baby Friendly Initiative in Ontario at conferences and other educational opportunities.

So much wonderful networking is happening throughout the province as a result of the work the members continue to do. We invite you to participate in the meetings and conference calls, share resources and gain strength from each other along the Baby Friendly road.

Please renew your membership and invite your colleagues to join us too! Download a membership form from the website

www.breastfeedingontario.org

....Just for fun!



*OBC member. Martha Svacina
Manager, Family Health, Region of Waterloo*

Spotted this week at a meeting of the Region of Waterloo BFI Committee in Kitchener – the best used copy of the BFI Guidelines in Ontario - in all it's raggedy glory! The book that is...

“Step-by-Step, Day-by-Day ...that’s the Baby Friendly way”

Step 10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

The strength of the safety net of breastfeeding support provided by the Baby Friendly Initiative is most evident in the implementation of Step 10 without which the continuum of care falters. It is during the crucial phase between hospital discharge and post partum follow up by Community Health Services or family doctor that some mothers and babies have breastfeeding challenges that can escalate and lead to breastfeeding cessation. When a solid 10th Step is in place, the transition from birth to successful breastfeeding is protected by not only the health care system including midwives, public health nurses, lactation consultants and physicians but equally as important, by peer support.

According to the BFI Indicators, assessors will expect that:

“Mothers confirm an effective transition from hospital, birthing centre or midwife to CHS and know at least one way to access breastfeeding support outside of office hours.

The manager responsible for client programs or services (or alternate) describes an adequate procedure for the transition from hospital to CHS and describes the liaison and collaboration between the CHS and the local community to promote/support breastfeeding.

Staff who provide direct breastfeeding care describe effective transition for all mothers from hospital or birthing centre to CHS and can locate the written support materials provided to mothers.

Planning for an effective transition from hospital or birthing centre to Community Health Services (CHS) includes:

- assessment of all mothers-baby dyads prior to discharge for effectiveness of breastfeeding

- provision of written information prior to discharge on the signs of successful breastfeeding and where to seek assistance for concerns
- referral to community resources ; established community resources such as mother-to mother (peer) support groups, and other services such as baby clinics, telephone help lines, home visits from community health nurses, and breastfeeding clinics
- evidence of strong liaison and communication between hospital and community facilities.

Mothers (of a random sample including those with caesarean deliveries, at least 80% of those who are breastfeeding)

- confirm that their plans for infant feeding after discharge were explored
- report that the hospital or community health service will provide follow-up support after hospital discharge
- know which CHS staff members they can contact for help with breastfeeding and know how to access those staff members
- are aware of professional and lay support services in the community
- describe one thing that has been recommended to ensure that they can be linked to a breastfeeding mother-to-mother support group or peer breastfeeding counsellors
- relate appropriate information about accessing breastfeeding support out of office hours." *The Ten Steps and Practice Outcome Indicators For Baby-Friendly™ Hospitals 2004.*

This step becomes even more critical when short hospital stays are in effect. The first 24 hours of life is a physiological transition which normally consists of an initial period of alertness when the baby is most likely to breastfeed (if skin to skin is allowed to take place for a least 30 minutes immediately or as soon after delivery as possible), followed by a long recovery period when both mom and baby need to rest and sleep.

[Cont. on Page 6](#)

Cont. from page 5...

Sometimes the first few feeds after this rest period are tentative and nurses are pressured to intervene in order to meet discharge criteria. Hand expression of colostrum for the baby by the mother combined with continuous skin to skin (fathers can do this too) are known to help this transition and facilitate effective feeding.

When feeding plans are shared between care givers e.g. hospital discharge plan shared with Healthy Babies Healthy Children or the post-partum or breastfeeding clinic, communication is improved and so is continuity of care and the families' perception of conflicting advice or information is reduced.

Kathy Venter

News Flash !

The Province of Quebec forges ahead with another community health center, CLSC Vaudreuil-Soulanges, earning BFI designation on June 21, 2006.

The recommendation for designation came after 3 days of intense work by a team of BFI Assessors led by Ginette Belanger who found abundant evidence of best practice and compliance with the International Code of Marketing of Breastmilk Substitutes.

Great work! congratulations from all the members of the OBC.



NOTICE BOARD

The Ontario Baby Friendly Initiative in Community Health Services

(Ont. BFI in CHS) has been formed to create opportunities for representatives of community health services to share and problem solve various aspects of implementing the *7-Point Plan* in their local health service agencies to meet the goals for BFI .

For more information contact
Hannele Dionisi

Telephone (705) 942-3103 ext 244
Fax (705) 541-7308
hannele_dionisi@ahu.on.ca

An invitation to network with other hospitals working on BFI:

This group meets to network and share strategies for implementation of the Baby Friendly (Hospital) Initiative.

Two meeting have occurred in the Toronto area and have proved most useful to the participants; we would like to encourage this kind of networking across the province.

Please contact Kathy Venter if you are interested in participating
kventer1@cogeco.ca