

## Baby-Friendly Hospital Revalidation – the Journey Continues

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### Background

In its third year as a Baby-Friendly Hospital, the Prince of Wales Hospital (PWH) was due for revalidation in 2022. The revalidation process was similar to the initial designation exercise. Apart from a substantial amount of paperwork, preparation for a site assessment by the team of Assessors from the Baby-Friendly Hospital Initiative Hong Kong Association was required.



### The Challenges

Stepping into the first quarter of 2022, we geared up for the preparation of the revalidation process. This was soon challenged by the COVID-19 outbreak as infection cases soared within the first few months. Fearing the infection, mothers-to-be avoided the hospital as much as possible; while many postnatal mothers opted for an early hospital discharge. Thus, within such short encounters, educating and preparing parents for birth and infant feeding became a problem.

The pandemic created further difficulties. Unwell infants who had to be admitted to the Neonatal Unit were separated from their mothers once the latter were discharged from hospital. Due to infection control measures, visitations were restricted, thus causing great distress. Meanwhile, in the antenatal and postnatal wards of the Obstetric Department and a paediatric ward of the Surgical Department, services underwent conversions and changes were made in care activities, in order to accommodate the influx of COVID-19 infected patients and their needs. Some hospital staff were deployed to quarantine centres, further straining our already limited manpower. Under these drastic changes, staff stress levels were inevitably high. The revalidation process put additional pressure on our teams. All these obstacles left us wondering how we could maintain a supportive environment for parents without over-stretching our staff and prepare for site assessments smoothly. Overcoming the challenges of the pandemic while sustaining a quality service appeared a mammoth task to us.

### **The Opportunities: An Inter-departmental Team Approach**

To tackle the many challenges, we sought input from our teams. One option was to postpone the BFHIHKA site assessment to sometime later in the year. Even so, we were still concerned that when the time came for the assessment visit, some wards which had been converted for COVID purposes could still be required to serve the COVID-19 patients. Would the assessment run smoothly if the venues were still not ready? How would our staff manage the service conversions and the revalidation site assessment simultaneously?

In the *Department of Obstetrics and Gynaecology*, we help mothers to prepare for the birth of their babies. We aim to create a breastfeeding-friendly environment, to give every baby the best start in life. Despite being a busy unit, with the highest number of births in Hong Kong, our staff spend time and effort to constantly advance their knowledge on breastfeeding and how to promote infant nutrition. Since it is important to engage and support breastfeeding mothers, the obstetric team provides early education during the women's antenatal period. During the worst of the COVID-19 pandemic, our team worked out safe and feasible measures to ensure that mothers would not be deprived of childcare education. These measures included virtual infant feeding education classes, which parents-to-be could safely and comfortably attend at home. Childbirth massage and techniques for gentle birth were taught on media platforms. Various educational videos were developed in-house, so that parents could access them via QR codes and learn at their own pace. To take every opportunity to clarify the concerns of mothers-to-be, we held group discussion sessions on infant feeding during the women's antenatal visits, in pre-operative assessment clinics, at gestational diabetes education sessions and on antenatal admissions.

For our own staff, apart from refresher training, in-house breastfeeding courses were continuously organised to ensure that new staff members were trained and enabled to provide proper care for our mother-infant dyads.

Recognising that the *Paediatric Department* of the Hospital played a crucial role in moving a hospital towards baby-friendliness, the entire paediatric team had been actively engaged throughout the accreditation and revalidation process. By reviewing the breastfeeding rates and identifying areas for improvement, colleagues had gone from being unfamiliar with the 'baby-friendly hospital initiative' to understanding its benefits to our patients and the community. This turnaround was achieved through planning, educating, and training our staff; driving teams to collaborate with each other; and constantly reviewing and improving our work processes. During teaching sessions, input was sought from front-line staff on potential obstacles and solutions to achieve the 'Ten Steps to Successful Breastfeeding'.

Despite the COVID-19 outbreak, the neonatal team played an important part in communicating with the mothers of infants who had been admitted into the Neonatal Unit. We urged these mothers to breastfeed, ensuring that they understood that breastfeeding was not only feasible but fully supported by the Unit, and they could seek help from our staff whenever breastfeeding difficulties were encountered. As soon as their babies' conditions were stable, we assisted inpatient mothers to visit and breastfeed. During our daily telephone calls to parents about the progress and care of their infants, we encouraged discharged mothers to bring their expressed breastmilk to the Neonatal Unit for their infants. Photos of the infants were taken for families who brought in expressed breastmilk, so that mothers who could not come in person would still be able to 'see' and feel connected to their infants. The photos also acted as mementoes for mothers to encourage their maintenance of lactation.

Furthermore, policies that might have resulted in mother-baby separation were assessed, as they have been a major obstacle to successful breastfeeding. The paediatric management team decided to re-evaluate the admission criteria to the Neonatal Unit. Thus, policies for neonatal jaundice, hypoglycaemia and newborns with infection risks were revised to safely minimise mother-baby separations.

A similar approach was adopted in the *Paediatric Unit of the Surgical Department*. The baby-friendly hospital initiatives were continuously promoted via various means, although conversions to COVID-19 Tier 2 wards were made intermittently during the outbreaks. We supported continual training, including lactation consultant courses and in-house breastfeeding courses, for the various ranks of staff. Mothers were facilitated to stay with their infants during their children's hospitalisation as far as

possible, despite under visitation constraints. Collaborating with the Paediatric and Obstetrics & Gynaecology departments, fast-track referrals of infants with tongue-tie for frenectomy were accepted from shared-care partners and other HA hospitals. As a result, the baby-friendly hospital revalidation process was well prepared for and supported, despite the adverse situation. We received positive feedback from patients, relatives, surgeons, and staff on the implementation of the initiatives in the Department. Thus, the slogan “We are baby-friendly. You are welcome to breastfeed your baby” was not only advocated but successfully implemented.

Efforts made were not confined to a few teams that directly serve women and their families. To ensure that mothers were able to receive timely care, those with blocked milk ducts were allowed direct referrals from the Maternal and Child Health Centres to the *Physiotherapy Department* for ultrasound treatment. These referrals were still accepted during the outbreak. In the *Dietetic Department*, with a firm belief that “Breastmilk is the best nutrition for babies” and “Breastmilk protects babies and mothers against diseases, enhances immunity, helps build a close relationship, and promotes a healthy weight”, staff diligently advised and encouraged mothers to continue breastfeeding to give extra protections to their infants during the outbreaks. Moreover, the Departmental Manager had no reservations in supporting her colleagues to continue breastfeeding when returning to work by ensuring a breastfeeding-friendly workplace that included the provision of lactation breaks. This support never ceased during the difficult times of the COVID-19 pandemic during which the team had a heavy workload.

Being a committee member in steering the hospital towards baby-friendliness, the *Hospital Administration* team exchanged views with multi-disciplinary members about working towards the common goal of nurturing a breastfeeding-friendly environment. Despite the heavy strain under the pandemic, the management continuously nominated both in-house and contract supporting staff working in the maternity and children wards to attend breastfeeding training, to equip them with the basic knowledge to promote and support breastfeeding in their daily work. To align with the corporate directive and to ensure strict compliance with the International Code of Marketing on Breastmilk Substitutes, our contractors of convenience stores were forbidden to sell infant formula and related products. To facilitate mothers to exclusively breastfeed their infants, the team managed two breastfeeding rooms to provide a warm and comfortable breastfeeding environment for visitors. Bearing in mind the importance of quality customer service at the first point of contact, the team had no hesitation to arrange the staff of the Enquiry Service and Security Section to attend related breastfeeding training so that they could promptly provide information and render assistance to visitors in need of breastfeeding support.



To comply with the baby-friendly hospital initiative, multiple platforms were used to engender the right atmosphere in the hospital. Specially designed posters aiming at raising public awareness of the multiple benefits of breastfeeding and an artistically touched-up Hospital Policy on Infant Feeding had been put up permanently at conspicuous locations of the hospital, including patient waiting areas, passenger lifts, and hospital departments and wards. Promotional video clips, with a catchy theme song written by a group of nurses, were produced and included in the broadcast loop of all public information screens. Whenever a suitable opportunity arose, stories on baby-friendly hospital initiatives were submitted to the staff newsletter, further boosting staff awareness. The hospital website was also used as a promotion platform, with the strategic placement of a quick link and hot button pointing to a dedicated breastfeeding index page and all available breastfeeding resources.

To engage the community leaders, hospital representatives readily attended the local district council meetings, to brief councillors on the progress of the baby-friendly hospital initiative and participated in related discussions. Public enquiries were also promptly handled. All our initiatives combined to give a powerful signal that not only a few departments, but the whole hospital, was committed to promoting and supporting breastfeeding.

### **The Revalidation**

Following the sustained efforts of all our teams, it was time for the revalidation site assessment at last. We were very fortunate that the outbreak had started to die down by that time, so that the temporary COVID-19 wards could be converted back to their original purposes before the big day. Though it imposed some stress on our staff and the interviewed postnatal mothers, the assessment was successfully carried out as planned. Learning from the process and the feedback of the Assessors, both nurses and doctors found the revalidation exercise useful in advancing their knowledge and skills. The Assessment Team was also a source of encouragement and inspiration to the staff for continuous improvement in their clinical practices. The designation and revalidation of PWH as a Baby-Friendly Hospital had significantly boosted our cohesion as a team and established a positive image of the Hospital in the eyes of the public.

### **The Baby-Friendly Journey Continues**

The 2022 revalidation process is over but by no means the end of the baby-friendly journey. Continuous monitoring and education will be carried out to ensure that our staff are up-to-date with the latest evidence-based practices. Moving forward, we hope to continue to support mothers and babies on their wonderful experiences in breastfeeding. The COVID-19 pandemic has taught us a very good lesson. This

includes our preparedness for possible future challenges from other outbreaks. It is now a suitable time for us to explore how to minimise infection risks for mothers and infants. As an increase in hospitalisation is anticipated during outbreaks, we should aim to enhance the support for mothers who need to breastfeed their sick infants. In the future, with the newly commissioned inpatient block in PWH, we should keep abreast with contemporary care models and promote baby-friendliness at a new horizon.

Meanwhile, the adoption of the WHO Competency Verification Toolkit 2020 would be beneficial in assessing and identifying gaps for in-service training and continuing staff education. It would also help improve the currently less effective implementation of some steps (among the “Ten Steps to Successful Breastfeeding”) and meet future needs. However, modifying the Toolkit for local applications would be difficult in view of the possible workload and current manpower constraint. Combining the efforts of all designated Baby-Friendly Hospitals in Hong Kong may be a viable option.

Being revalidated as a Baby-Friendly Hospital is the pride of the Hospital and the teams. This achievement is a testament to the resilience of our staff and our systems at PWH. Rome was not built in a day. Making the entire institution baby-and-mother-friendly is by no means something that a small number of people can accomplish, but requires the cooperation, support, and participation of multiple parties that include the management, nursing, medical and paramedical teams, families, as well as the wider community. Our departments have always been striving for the best interests of our patients and we endeavour to maintain a high standard of service, even during difficult times.

Happily announcing our success in the revalidation, our Baby-Friendly Hospital Coordinating Committee Chairperson, Ms. Becky Ho, who is also the Cluster General Manager (Nursing) of the New Territories East Cluster (NTEC) said, “I am deeply impressed by the professionalism of our colleagues who have made it during the hard times of the COVID outbreak. Being baby-friendly is crucial for mothers and babies as well as for our next generation.” She added, “So the revalidation is not just a regular exercise, but also the organisational culture that should keep growing and be embedded everywhere at all times.” Ms. Ho, in various occasions, urged the Cluster staff, “After the Baby-Friendly Hospital revalidation of PWH, the NTEC Breastfeeding Promotion Committee aims to spread the baby-friendly culture to all seven Cluster hospitals. Being a nurse, midwife, and the Chairperson of the Committee, I seriously solicit the support from all departments in the NTEC hospitals to make our dream come true, that is, to make NTEC a Baby-Friendly Cluster. Besides the clients, our staff should also enjoy a baby-friendly environment, the good practices and support everywhere. We hope our future is full of happy and healthy mothers and babies!” Keeping a positive mind set, this slogan may best describe our teams:

***“Breastfeeding and work, we are here to make it work!”***

## Key Messages:

1. The Prince of Wales Hospital encountered challenges that arose from the 'COVID-19' outbreaks during the preparation for its 'Baby-Friendly Hospital' revalidation process.
2. Various approaches were developed across departments to overcome the constraints parents faced in preparing for childbirth and infant feeding.
3. Separations of infants from mothers were reduced by reviewing the Neonatal Unit's admission policies and encouraging parental visitations within infection control restrictions.
4. To create a supportive atmosphere for breastfeeding, the Hospital launched promotional activities across multiple platforms to engage the parents, the staff, and the community.
5. In addition to the Hospital's existing system, the key to successfully navigating the challenges was the resilience and cohesion of the teams throughout the process.
6. The article also discusses the Hospital's direction of breastfeeding promotion after the reaccreditation.

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Views expressed in this article are the authors' and do not necessarily reflect the opinion or position of the BFHIHKA.

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