

Perinatal Services BC's 3rd Biennial Conference

Healthy Mothers and Healthy Babies

Working Together to Improve Perinatal Outcomes

March 1 - 2, 2018

Sheraton Vancouver Airport
Richmond, BC

HOSTED BY:



www.interprofessional.ubc.ca/initiatives/hmhbc2018



DESCRIPTION

This conference is hosted by Perinatal Services BC, an agency of the Provincial Health Services Authority. It is an opportunity for health care professionals interested in the care of pregnant and postpartum women and their newborns to be updated on new research and clinical best practices across the continuum of perinatal and newborn care. This conference will engage health care professionals from a wide range of disciplines in knowledge transfer and interprofessional collaboration in order to provide the best care possible and ensure healthy mothers and babies. The format will include plenaries, breakout sessions, poster sessions, and networking opportunities.

LEARNING OBJECTIVES

As a result of attending this conference, participants will be able to:

- Review clinical best practices and new research acquired from researchers, experts, women and their families, and fellow participants, that will enhance shared decision making with pregnant and postpartum women;
- Reflect on five new developments across the continuum of care from conception to postpartum that will impact clinical practice;
- Discuss current surveillance and system improvements in perinatal services that are relevant to improving maternal/fetal and newborn outcomes; and
- Integrate knowledge learned by engaging in dialogue with other health care professionals from a range of disciplines, as well as women and their families.

LOCATION

**Sheraton Vancouver Airport
7551 Westminster Highway, Richmond, BC**

We are pleased to offer a group rate of \$149 for single or double occupancy, plus applicable taxes. To reserve a room, please book online or call +1-800-663-0299. Let the hotel personnel know that you are booking under the Healthy Mothers and Healthy Babies 2018 Conference room block to receive the reduced rate.

TRAVEL INFORMATION

The Sheraton Vancouver Airport (7551 Westminister Highway) is conveniently located in Richmond BC, and offers free, 24-hour transportation to and from the Vancouver Airport. By Skytrain, the Canada Line connects the conference hotel to downtown Vancouver in under 30 minutes (www.translink.ca). The Richmond-Brighouse and Landsdowne SkyTrain stations are each about a 10 minute walk from the hotel.

PARKING

Parking at the hotel is complimentary for conference attendees. Should you wish to park in the hotel parking lot, please visit: www.verrus.com/default.asp?ctState=hpEventPark&hpEventUID=107386 to register your licence plate. Once your license plate is registered, you can simply park, and proceed to the conference.

Vancouver provides visitors with many opportunities to experience the West Coast lifestyle. If you would like more information on travelling in the area or things to do and see in Vancouver, go to: www.tourismvancouver.com

WHO SHOULD ATTEND

This conference will be of interest to all those who are interested in care for pregnant women and their newborns. The interdisciplinary target audience includes but is not limited to:

- Administrators/Managers/Planners
- Allied Health Professionals (Occupational Therapists, Physical Therapists,
- Educators, Informatics Professionals, Respiratory Therapists, etc)
- Dietitians
- Doulas
- Faculty of Nursing, Medicine, or Health Sciences
- Lactation Consultants
- Midwives
- Nurses and Nurse Practitioners (Primary Care, Public Health, and Acute Care)
- Physicians (Primary Care and Specialists)
- Policy Makers
- Researchers
- Students/Learners

ACKNOWLEDGEMENTS

We would like to acknowledge with great appreciation the financial contributions through unrestricted educational grants from:



REGISTRATION & TUITION FEES

The tuition fee includes conference materials, refreshment breaks, and lunches on both days of the conference. Please see the registration form for further details. The Early Bird discounted registration rate expires on January 26, 2018. Registration prior to February 15, 2018 is strongly recommended to ensure you receive all conference materials.

Online: The most secure method. Secure, fast, online registration is available for Visa and MasterCard holders at the conference organizer's website: interprofessional.ubc.ca

Phone: Register and pay over the phone. Toll-free within Canada/USA: 1-855-827-3112 or Local/International: +1 604-827-3112.

Fax: Fax the registration form to +1 604-822-4835 and indicate that you would like to pay with VISA or MasterCard. We will email you the secure online link to enter your credit card information.

Mail: Send the registration form with cheque to:
Interprofessional Continuing Education
The University of British Columbia
Room 105-2194 Health Sciences Mall
Vancouver, BC, V6T 1Z3, Canada
Make cheque payable to: The University of British Columbia

Alternative Payment Methods:

Mail or fax complete registration form along with one of the following:

1. Signed purchase order (PO)
2. Letter of Authorization (LOA) from the manager on the organization's letterhead stating that they will be paying the registration fees. The letter should include the amount of registration fees, name and contact information of the manager
3. Signed cheque requisition form (ChReq)

REFUND/TRANSFER & CANCELLATION POLICY

There will be a \$50 cancellation fee until the end of the Early Bird deadline (January 26, 2018). After that there will be a \$100 charge for up to two weeks (February 15, 2018) prior to the conference (all fees incl. taxes). Two weeks or less there will be no refund.

If you are unable to attend the conference, you are welcome to send a colleague in your place. There will be no fee to make this change up to January 26, 2018, provided you notify us via phone or email. Substitution requests must come from the original registrant (or the administrator who arranged for the registration) and include the original registrant's name, the amount paid, plus the substitute attendee's email, full name, city and affiliation. Substitution requests received after this date will incur a \$75 processing fee.

PROFESSIONAL CREDITS

Participants will receive a certificate stating 11.5 hours of educational instruction they have attended. For updates regarding credits and other conference updates, visit our website:

<http://interprofessional.ubc.ca/initiatives/hmh2018/>

EXHIBITING

Organizations interested in exhibiting at this conference are invited to contact the conference organizers for more information.

Exhibit space is limited. Please contact by phone: +1-604-822-7524 or by e-mail: cynthia.ipce@ubc.ca.

PLANNING COMMITTEE

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Primary Maternity Care Lead, Family Physician, Perinatal Services BC

Janet Walker

Director, Provincial Knowledge Transformation and Acute Care, Perinatal Services BC

PROGRAM AT A GLANCE

THURSDAY, MARCH 1

7:00 AM - 8:00 AM	Registration and Breakfast
8:00 AM - 9:00 AM	Traditional Welcome and Opening Remarks
9:00 AM - 10:00 AM	Plenary by Belinda Fu
10:00 AM - 10:30 AM	Break
10:30 AM - 12:00 PM	Concurrent Sessions A (Page 4)

A1i (45 Minute Session) <i>Improving the Health Care Response to Gender-based Violence</i>	A2i (45 Minute Session) <i>First Nation Families and Health Care Providers – Walking the Perinatal Journey Together</i>	A3i <i>SmartMom: Texting for Prenatal Education</i>	A4i <i>Newborn Sepsis: Who Needs Treatment?</i>
A1ii (45 Minute Session) <i>Cultivating Resilience: Maternity Care Providers Mitigate Intergenerational Impacts of ACEs</i>	A2ii (45 Minute Session) <i>Building Blocks for Sustainable Rural Maternity Care</i>	A3ii <i>Is Your Prenatal Ultrasound Department Family-Centred? Why You Should Care and What You Can Do</i>	A4ii <i>Sudden Unexpected Postnatal Collapse</i>
		A3iii <i>Developing Provincial and National Breastfeeding Protocols: A Cross-Organizational...</i>	A4iii <i>Shaping Health Equity Practice: A Review of Key Perinatal Documents in British Columbia (2002-2017)</i>

12:00 PM - 1:00 PM	Lunch
1:00 PM - 1:30 PM	Poster Session
1:30 PM - 3:00 PM	Concurrent Sessions B (Page 6)

B1i <i>Immigrant Women and Reproductive Mental Health Care Access: An Environmental Scan</i>	B2i <i>Pasteurized Donor Human Milk: When Do We Use and When Do We Abuse?</i>	B3i (45 Minute Session) <i>Informed Decision Making for Next Birth after Caesarean Section</i>	B4i <i>Legalization of Cannabis: Implications for Maternal and Infant Health in BC and Emerging Best...</i>
B1ii <i>Interventions That Improve Maternity Care for Immigrant Women in England: A Narrative Synthesis...</i>	B2ii <i>Domperidone for Breastfeeding: What Does the Evidence Tell Us?</i>	B3ii (45 Minute Session) <i>Forceps, Vacuum, or Cesarean? Evaluating Mode of Delivery Options Following an Arrest in Labour</i>	B4ii <i>Are We Over-Treating Infants with Neonatal Abstinence Syndrome?</i>
B1iii <i>MotherFirst: Maternal Mental Health Strategy for Saskatchewan</i>	B2iii <i>Baby-Friendly Re-Designation: Not All Sunny Ways and Sunny Days!</i>		B4iii <i>Clinical Management of Opioid Use Disorder in Pregnant Women</i>

3:00 PM - 3:30 PM	Break - Exhibits Open, Poster Viewing
3:30 PM - 4:30 PM	Plenary Session by Cindy-Lee Dennis
4:45 PM - 7:00 PM	Networking Reception <i>(Held at the Conference Hotel)</i>

PROGRAM AT A GLANCE

FRIDAY, MARCH 2

7:30 AM - 8:00 AM	Registration and Breakfast
8:00 AM - 8:30 AM	Opening Remarks and Door Prizes
8:30 AM - 9:30 AM	BC Success Stories Panel
9:30 AM - 10:30 AM	Plenary by Chelsea Elwood
10:30 AM - 11:00 AM	Break
11:00 AM - 12:30 PM	Concurrent Sessions C (Page 10)

C1i <i>Healthy & Home: A Program for New Mothers</i>	C2i <i>Shifting the Public Health Nursing Care Paradigm in Island Health: The Mother's Story</i>	C3i (45 Minute Session) <i>Rolling into Parenthood: Key Physical, Mental Health and Breastfeeding Considerations When Working with...</i>	C4i <i>HerWay Home: Lessons Learned and Promising Practices for Supporting Perinatal Substance Using Women...</i>
C1ii <i>Smoothing the Transition from Hospital to Home - Innovative Strategies to Prepare for Parenting...</i>	C2ii <i>Walking Together: A Participatory Action Research Approach to Developing Physical Activity...</i>	C3ii (45 Minute Session) <i>Benefits of Kangaroo Care: Patient and Provider Perspectives</i>	C4ii <i>Mobile Maternity (MoM) - A New Kind of Telehealth</i>
C1iii <i>Can the "ABC's for New Parents" book, Developed through an Interprofessional Collaboration...</i>	C2iii <i>MOREOB in BC: Improving Outcomes During Large Scale Change</i>		C4iii <i>Evaluating the Impact of Enhancing Prenatal Healthcare Services: The BC Experience with Publicly-funded...</i>

12:30 PM - 1:30 PM	Lunch & Poster Viewing
1:30 PM - 3:00 PM	Concurrent Sessions D (Page 13)

D1i <i>Place of Birth: Examining Interprofessional Conflict vs Effective Collaboration Controversy among ...</i>	D2i (45 Minute Session) <i>Engaging with the Truth and Reconciliation Commission Call to Action #33: Dialogue on FASD ...</i>	D3i <i>Applying an Adverse Childhood Experience (ACE) Lens to the Postpartum Population</i>	D4i <i>Motherwise Fills Gaps for Moms at Risk</i>
D1ii <i>Reduced Prevalence of Small-for-Gestational-Age Birth For Vulnerable Women: A Study of Midwifery versus...</i>	D2ii (45 Minute Session) <i>Support in the Perinatal Period for Women Struggling with Addiction: A Trauma Informed Approach</i>	D3ii <i>The BC Healthy Connections Project (BCHCP): A Scientific Evaluation of Nurse-Family Partnership in Canada</i>	D4ii <i>Childbirth Education: Building Women's Capacity</i>
D1iii <i>Barriers to Addressing Perinatal Mental Health Issues in Midwifery Settings</i>		D3iii <i>The Childbirth Fear Questionnaire (CFQ): A New Measure of Fear of Childbirth</i>	D4iii <i>Stakeholder Consultation: Quality Process in the Production of Quality Improvement Maternity Education...</i>

3:00 PM - 3:30 PM	Break - Exhibits Open, Poster Viewing
3:30 PM - 4:30 PM	Plenary Session by Louis Francescutti
4:30 PM - 5:00 PM	Closing Remarks, Door Prizes and Evaluation

THURSDAY, MARCH 1

7:00 AM - 8:00 AM
REGISTRATION & BREAKFAST

8:00 AM - 9:00 AM
TRADITIONAL WELCOME & OPENING REMARKS
Opening Remarks by: *Susan Wannamaker, President, BC Children's and Women's Health, and Vice President, Provincial Health Services Authority*

9:00 AM - 10:00 AM

Plenary

Improvisation and the Art of Medicine: Adaptable Skills for an Uncertain World



Belinda Fu, MD, Clinical Assistant Professor, Department of Family Medicine, University of Washington; Faculty, Swedish Family Medicine Residency Program, First Hill, Seattle, WA, USA

Medical improvisation is the adaptation of improvisational theatre training methods to the healthcare context, promoting collaborative patient care through improved communication, cognition, and wellbeing. In this session, Dr. Belinda Fu describes her experiences with Medical Improv as a clinician, patient, and educator, and explains its power to improve communication, cognition, and resilience through experiential learning. With compelling stories and interactive exercises, she explores how improvisation can increase awareness of emotional cues, create rapport through affirmation, and improve one's ability to thrive in unpredictability.

Learning Objectives:

- Define medical improv
- Describe the three main curricular components of medical improv and their relevance to clinical training
- Explain the core skill groups of medical improv and their relevance to clinical practice

10:00 AM - 10:30 AM
BREAK



10:30 AM - 12:00 PM

A1

A1i | 45 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Improving the Health Care Response to Gender-based Violence

Ann Pederson, PhD, Director, Population Health Promotion, BC Women's Hospital & Health Centre, Vancouver, BC

Stephanie Bouris, Policy Analyst, Women's and Maternal Health, Division of Population and Public Health, BC Ministry of Health, Victoria, BC

Nancy Delgado, Team Leader, Nurse Family Partnership Program, Maternal Child - Population Health, Kelowna Community Health Services Centre, Interior Health Authority, Kelowna, BC

Kate Rossiter, PhD, Research & Projects Manager, Ending Violence Association of BC, Vancouver, BC

Panelists from the Ministry of Health, Population Health Promotion at BC Women's, and Interior Health's Maternal Child Health program will speak about the design, content, and implementation of a new online course to support maternity health care providers working with women who are experiencing or have survived gender-based violence.

Learning Objectives:

- Describe the responsibility of the health sector with respect to IPV in the perinatal period
- Identify some of the key signs of gender-based violence
- Understand the LIVES approach as a tool for engaging with women who may have experiences of or be experiencing IPV

A1ii | 45 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Cultivating Resilience: Maternity Care Providers Mitigate Intergenerational Impacts of ACEs

Roxanne Blemings, MSW, Practice Initiative Lead, Child Youth Mental Health Substance Use Collaborative, Doctors of British Columbia, Victoria, BC

Theresa Killam, MD, CCFP, MEd, Family Physician, Calgary Foothills Primary Care Network, Riley Park Maternity Clinic; Clinical Lecturer, Department of Family Medicine, University of Calgary, Calgary, AB

Jan Ference, BEd, MS, NMT Mentor, IPMHF, Director, Pathways to Healing Partnership, Comox Valley Child Development Association, Courtenay, BC

Expanding on what we know about the power of early intervention and the connection between ACEs and social determinants of health, we will explore the how, the who, the what and the then what of applying the ACEs questionnaire into maternity care practices.

Learning Objectives:

- Recognize how attention to adverse childhood experiences (ACEs) in maternity care strengthens health outcomes for multiple generations
- Reflect on the practical application of ACEs history taking through case examples and dialogue with peers
- Devise an action plan to integrate ACEs history taking and attention to resilience into local inter-disciplinary maternity practice

A2

A2i | 45 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

First Nation Families and Health Care Providers: Walking the Perinatal Journey Together

Barbara Webster, RN, BScN, MSc, Clinical Nurse Specialist, Maternal Child, First Nations Health Authority, Vancouver, BC

Lucy Barney, RN, BSN, MSN, Statlimx Nation, Aboriginal Lead, Perinatal Services BC, Vancouver, BC

Understanding the history and background of First Nations people is vital in providing cultural safe care to childbearing families. This presentation will briefly discuss the history of Indigenous people and how their history impacts on their lives today. We will use a case study to emphasize the need for relational practice, trauma informed care and cultural safe practices with First Nation women and families as they prepare for and live the experience of pregnancy, childbirth and parenthood.

Learning Objectives:

- Recognize the need to provide culturally based, trauma informed and relational practice care
- Discuss ways to provide holistic care to First Nation women and families
- Learn what FNHA resources are available for clients and care providers

A2ii | 45 MINUTE STANDARD LECTURE | New Research

Building Blocks for Sustainable Rural Maternity Care

Jude Kornelsen, PhD, Associate Professor, Department of Family Practice; Co-Director, Centre for Rural Health Research; Director, Applied Policy Research Unit, University of British Columbia, Vancouver, BC

Kira Barwich, MSc, Research Coordinator, Centre for Rural Health Research, University of British Columbia, Vancouver, BC

We will present the results of a community-driven feasibility analysis of the building blocks for sustainable rural maternity care and the evidence-based strategy for supporting local services. We will also discuss the applicability to the other low-resource rural maternity services in BC and the adaptations necessary for other local contexts.

Learning Objectives:

- Report findings from a feasibility analysis of system supports to sustain rural maternity care on the North Island
- Discuss relevance of findings to other rural communities in BC
- Formulate actionable recommendations for system change to sustain rural maternity care moving forward

A3

A3i | 30 MINUTE STANDARD LECTURE | New Research

SmartMom: Texting for Prenatal Education

Patricia Janssen, PhD, Professor and Co-lead, Maternal Child Health, School of Population and Public Health, University of British Columbia, Vancouver, BC

SmartMom is a prenatal education program delivered by texting messaging. Less than 30% of pregnant women attend prenatal classes in Canada. Smart Mom is Canada's first evidence-informed prenatal texting program, developed in partnership with Optimal Birth BC, the Ministry of Health, and the Northern Health Authority. SmartMom launched throughout the NHA in April, 2017. Women enrol at their first prenatal visit, with a primary care nurse.

Learning Objectives:

- Understand the components of SmartMom
- Understand what SmartMom offers beyond traditional phone "apps"
- Understand how texting has the potential to change behaviour
- Learn findings of formative and process outcomes

A3ii | 30 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Is Your Prenatal Ultrasound Department Family-Centred? Why You Should Care and What You Can Do

Suzanne Moccia, Volunteer, Patient Voice Network, Penticton, BC

Leandro Nosal, Volunteer, Patient Voice Network, Penticton, BC

Meggie Ross, RN, MSN, Public Health Maternity Care Program, Interior Health, Penticton, BC

Bernd Wittmann, MD, FRCSC, Maternal Fetal Medicine and OB/Gyn Ultrasound, Private Practice, Surrey, BC

Most BC Medical Imaging departments continue to exclude family and support persons from being present during the exam – restricting them to a 'show and tell' at the end. This has been a largely unrecognized gap in our continuum of family-centred perinatal care. This discussion will explore one family's journey to change this practice, a facility's engagement in a quality improvement process, and why you should consider the same.

Learning Objectives:

- Recognize the profound impact this exclusionary policy has on the experience for both the patient and their family/support person
- Explore the rationale for current policy from a medical imaging perspective, how a family-centred care framework supports a change in practice, and benchmark examples within the province
- Discuss how a quality improvement framework can be used to guide practice change

A3iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Developing Provincial and National Breastfeeding Protocols: A Cross-Organizational, Cross-Provincial Initiative

Sonya Boersma, MScN, RN, IBCLC, Health Promotion Consultant, BFI Strategy For Ontario, Ottawa, ON

Lea Geiger, BScN, RN, IBCLC, Provincial BFI Coordinator, Perinatal Services BC, Provincial Health Services Authority, Kamloops, BC

Evidence-based breastfeeding protocols are in development cross-organizationally and cross-provincially. Learn about the collaborative approach, rigorous methodology, and how these will help your work with clients or patients and your work implementing the Baby-Friendly Initiative.

Learning Objectives:

- Examine the methodology and tools used to create high-quality, evidence-informed breastfeeding protocols for health care providers
- Describe the lessons learned and opportunities of using a cross-organizational and multi-provincial approach to develop a resource that is applicable and transferable across provinces
- Familiarize participants with the revised protocols while explaining the importance of having access to current, consistent, evidence-informed, and BFI-aligned information when counselling clients with breastfeeding

A4

A4i | 30 MINUTE STANDARD LECTURE | New Research

Newborn Sepsis: Who Needs Treatment?**Pascal Lavoie, MDCM, PhD, FRCPC, Neonatologist, Division of Neonatology, BC Women's & Children's Hospitals, Vancouver, BC**

Infections in newborns can progress fast and are difficult to diagnose. Doctors depend on clinical experience and blood tests to determine when to treat, but these tests are imperfect. This presentation is about the latest research on new technologies to assist healthcare workers in accurately identifying which babies require treatments.

Learning Objectives:

- Review the epidemiology of neonatal death from infections locally in BC, but also globally
- Identify clinical signs that most reliably indicate infection of bacterial causes that require immediate antibiotic treatment
- Describe new technologies that can help with diagnosis

A4ii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Sudden Unexpected Postnatal Collapse**Lani Wittmann, RN, MSN, IBCLC, PNC(c), Senior Practice Leader, Perinatal, BC Women's Hospital, Vancouver, BC****Kaylee Larocque, MSc, BHK, Nursing Student, School of Nursing, University of British Columbia, Vancouver, BC****Samantha Buchanan, BSc, Nursing Student, School of Nursing, University of British Columbia, Vancouver, BC****Kate McKinnon, BSc, Nursing Student, School of Nursing, University of British Columbia, Vancouver, BC****Jessica Peattie, BSc, Nursing Student, School of Nursing, University of British Columbia, Vancouver, BC**

Sudden Unexpected Postnatal Collapse is a rare but catastrophic event. Some countries have noted an increase in its occurrence associated with the promotion of skin-to-skin contact and breastfeeding. We will present data and recommendations for the appropriate monitoring and surveillance of mothers and newborns during the first hours after birth.

Learning Objectives:

- Define Sudden Unexpected Postnatal Collapse
- Identify risk factors for Sudden Unexpected Postnatal Collapse
- Discuss current recommendations for providing safe skin-to-skin care while at the same time ensuring the appropriate degree of surveillance for the prevention of Sudden Unexpected Postnatal Collapse



A4iii | 30 MINUTE STANDARD LECTURE | New Research

Shaping Health Equity Practice: A Review of Key Perinatal Documents in British Columbia (2002-2017)**Megan Black, MPH, Epidemiologist, Aboriginal Health Program, Interior Health Authority, Kelowna, BC**

A review of key documents shaping perinatal public health practice the last 15 years was conducted to explore how they influence the prioritizing (or not) of health equity. Recommendations for creating a supportive context for health equity promotion within perinatal public health programs and services in BC are offered.

Learning Objectives:

- Appraise the documents that are informing perinatal public health practice in BC
- Describe the influence of these documents on health equity work in perinatal public health services in BC over the last 15 years
- Identify opportunities for prioritizing health equity in perinatal public health practice

12:00 PM - 1:00 PM

LUNCH

1:00 PM - 1:30 PM

POSTER SESSION - PRESENTERS AVAILABLE

1:30 PM - 3:00 PM

B1

B1i | 30 MINUTE STANDARD LECTURE | New Research

Immigrant Women and Reproductive Mental Health Care Access: An Environmental Scan**Joyce O'Mahony, RN, PhD, Assistant Professor, School of Nursing, Thompson Rivers University, Kamloops, BC****Nancy Clark, RN, PhD, Assistant Professor, School of Nursing, University of Victoria, Victoria, BC****Joanne Smrek, RN, BScN, Regional Knowledge Coordinator, Population Health, Maternal Child Health Interior Health Authority, Penticton, BC**

An environmental scan was conducted to increase understanding of immigrant women's reproductive mental healthcare services within the Interior Health communities of British Columbia. Based on the study's findings, key recommendations and implications for policy and practice are presented to assist with reproductive mental health care services for immigrant women.

Learning Objectives:

- Recognize what barriers and facilitators may influence immigrant women's help seeking behavior for postpartum mental health
- Describe what factors can facilitate capacity building for immigrant women's postpartum care
- Plan strategies that will contribute to culturally appropriate healthcare programs and policies that address reproductive care among immigrant women

B1ii | 30 MINUTE STANDARD LECTURE | New Research

Interventions That Improve Maternity Care for Immigrant Women in England: A Narrative Synthesis Systematic Review

Gina Awoko Higginbottom, PhD, MA, Postgrad Dip (Ed), BA (Hons), RN, RM, RHV, Mary Secole Professor, Ethnicity & Community Health, School of Health Sciences, Faculty of Medicine, University of Nottingham, Birmingham, West Midlands, UK

The session explores the experience of immigrant women in maternity care services. A narrative synthesis approach to systematic review was used to identify research studies both qualitative and quantitative. In addition to findings we will share aspects of the methodology of narrative synthesis systematic review, quality appraisal and synthesis.

Learning Objectives:

- Orientate participants to the methodology of narrative synthesis review
- Sensitive participants to the experience of immigrant women in maternity services
- Enable insights into international comparisons of the experience of immigrant women in maternity care services

B1iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

MotherFirst: Maternal Mental Health Strategy for Saskatchewan

Angela Bowen, RN, PhD, Researcher, College of Nursing, University of Saskatchewan, Saskatoon, SK

The MotherFirst Maternal Mental Health Strategy includes recommendations to increase awareness, screening, and services in Saskatchewan. The presentation will summarize the process of developing the recommendations, the implementation to date, and future trends. We will discuss a national maternal mental health coalition and World Maternal Mental Health Day.

Learning Objectives:

- Cite the rationale for a maternal mental health strategy
- Contrast the differences in Saskatchewan approach and those used in their own jurisdiction
- Discuss a national approach to improve maternal mental health

B2

B2i | 30 MINUTE STANDARD LECTURE | Clinical Update

Pasteurized Donor Human Milk: When Do We Use and When Do We Abuse?

Frances Jones, RN, MSN, IBCLC, Coordinator, BC Women's Lactation Service and the BC Women's Provincial Milk Bank, BC Women's Hospital, Vancouver, BC

The BC Women's Provincial Milk Bank has a unique model of cost sharing with all the provincial health authorities in order to provide ized donor milk at no charge. This session discusses what is happening in BC with a focus on what criteria should be used for ethical distribution.

Learning Objectives:

- Increase awareness of availability of donor milk in BC
- Outline why donor milk is "second best"
- Describe what actions must take place before giving a baby PDHM

B2ii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Domperidone for Breastfeeding: What Does the Evidence Tell Us?

Lorri Puil, MD, PhD, Editor, Cochrane Hypertension, Therapeutics Initiative Drug Assessment Working Group, Department of Anesthesiology, Pharmacology & Therapeutics, Faculty of Medicine, University of British Columbia, Vancouver, BC

Domperidone is widely used "off-label" to stimulate milk supply and has been subject to cardiac safety advisories. Our team conducted a systematic review of domperidone for breastfeeding. Based on randomized controlled trials, overall, benefits fail to outweigh harm. Limited observational data suggest potential cardiac harms extend to women of reproductive age.

Learning Objectives:

- Describe the key evidence on benefits and harms of domperidone use in new mothers and their infants
- Consider patterns and drivers of postpartum domperidone use in BC
- Promote evidence-based shared decision-making when women experience breastfeeding difficulties

B2iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Baby-Friendly Re-Designation: Not All Sunny Ways and Sunny Days!

Lani Wittmann, RN, MSN, IBCLC, PNC(c), Senior Practice Leader, Perinatal, BC Women's Hospital, Vancouver, BC

Frances Jones, RN, MSN, IBCLC, Coordinator, BC Women's Lactation Service and the BC Women's Provincial Milk Bank, BC Women's Hospital, Vancouver, BC

BC Women's Hospital was originally BFI designated in 2008 and nationally is one of only 6 hospitals to earn this award. Being the largest maternity facility in Canada serving the province's highest risk mothers and babies presented unique challenges. This presentation describes the strategies undertaken to achieve re-designation in 2017.

Learning Objectives:

- Outline 3 key BFI issues that were particularly challenging
- Describe two approaches taken at BC Women's to change habitual practices
- Identify three successful outcomes that reflected BFI standards



B3

B3i | 45 MINUTE STANDARD LECTURE | Clinical Update

Informed Decision Making for Next Birth after Caesarean Section

Sarah Kaufman, *Clinical Nurse Specialist, Perinatal Maternal Infant Child Youth Program, Langley Memorial Hospital, Fraser Health Authority, Langley BC*

Stephanie Bouris, *Policy Analyst, Women's and Maternal Health, Division of Population and Public Health, BC Ministry of Health, Victoria, BC*

A panel discussion of barriers to informed decision making, patient experiences and resources developed for women to make informed decisions for their next birth after a Caesarean section.

Learning Objectives:

- Describe the VBAC experience from multiple perspectives (patient, nurse educator/administrator and policy maker)
- Identify barriers for patient decision making for next birth after C-section
- Share patient resources designed to overcome barriers and support informed choice

B3ii | 45 MINUTE STANDARD LECTURE | New Research

Forceps, Vacuum, or Cesarean? Evaluating Mode of Delivery Options Following an Arrest in Labour

Giulia Muraca, *MPH, PhD Candidate, Vanier Canada Graduate Scholar, School of Population and Public Health, Department of Obstetrics and Gynaecology, University of British Columbia, Vancouver, BC*

The increased use of operative vaginal delivery (forceps- and vacuum-assisted delivery) has been recommended as a strategy to reduce the rate of cesarean delivery; however, the relative safety of these interventions is unclear. This session will include information on absolute and relative estimates of perinatal and maternal outcomes in operative vaginal and cesarean deliveries in Canada as well as population-level estimates of the associations between operative vaginal delivery, obstetric trauma and birth trauma.

Learning Objectives:

- Define temporal trends in operative vaginal delivery, obstetric trauma and birth trauma in Canada
- Quantify rates of severe perinatal and maternal morbidity and mortality associated with operative vaginal delivery compared with cesarean delivery
- Characterize the individual-level and population-level associations between operative vaginal delivery, obstetric trauma and birth trauma

B4

B4i | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Legalization of Cannabis: Implications for Maternal and Infant Health in BC and Emerging Best Practice for Response

Sabrina Luke, *PhD, Epidemiologist, Perinatal Services BC, Vancouver, BC*

Nancy Poole, *BA, DipCS, MA, PhD, Director, Centre of Excellence for Women's Health; Prevention Lead, CanFASD Research Network, Vancouver, BC*

Data from BC's Perinatal Data Registry will be introduced as a source for understanding the impact of cannabis use on maternal and child health. The association between cannabis use in pregnancy and perinatal outcomes will be presented and policy and best practices for prevention and harm reduction will be discussed.

Learning Objectives:

- Educate stakeholders, partners, providers and the public about the trends and risks associated with cannabis use in pregnancy among women in BC
- Highlight best practices for prevention and harm reduction, trauma-informed interventions and potential implications for providers and pregnant women in BC
- Review recent research on the mechanisms of action of cannabis on fetal development and pregnancy outcomes.

B4ii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Are We Over-Treating Infants with Neonatal Abstinence Syndrome?

Lenora Marcellus, *RN, BSN, MN, PhD, Associate Professor, School of Nursing, University of Victoria, Victoria, BC*

Overdiagnosis and overtreatment have gained attention as challenges for health systems. Neonatal Abstinence Syndrome (NAS) may be overdiagnosed with standardized assessment protocols and overtreated with current NICU-based models of care. Clinical approaches have not significantly changed for 40 years and there is interest, spurred by the current opioid crisis, in revisiting long-standing routine practices.

Learning Objectives:

- Discuss the history of the development of current clinical practices related to the care of infants with NAS
- Apply an ecological model to examine factors that influence current clinical practices
- Discuss emerging models of evidence-informed care related to supporting infants experiencing withdrawal, their mothers and families



B4iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Clinical Management of Opioid Use Disorder in Pregnant Women

Cheyenne Johnson, RN, MPH, CCRP, Director, Clinical Activities and Development; Director, Addiction Nursing Fellowship, British Columbia Centre on Substance Use, Vancouver, BC

Jola Berkman, RN, BScN, BSc(med)Hons, Coordinator, Neonatal Care, Perinatal Services BC, Vancouver,

This session will introduce and provide an overview to the newly released BC Centre on Substance Use and Perinatal Services BC Guidelines Supplement for the Clinical Management of Opioid Use Disorder in Pregnant Women.

Learning Objectives:

- Introduce the BCCSU Guideline Supplement for the Clinical Management of Opioid Use Disorder in Pregnant Women
- Provide an overview of care principles and treatment options for opioid use disorder during pregnancy
- Promote care that is centered on enhancing social determinants of health in order to improve long-term health outcomes for the women with opioid use disorder and substance exposed newborn
- Highlight the importance of incorporating trauma-informed care while treating pregnant women with substance use disorders
- Recognize the importance of rooming in and encouraging skin to skin contact, breast feeding, and other non-pharmacological strategies to mitigate symptoms of withdrawal in the substance-exposed newborn
- Discuss barriers and enablers that will influence implementation of this model of care for pregnant women with opioid use disorder and opioid-exposed newborn

3:00 PM - 3:30 PM

BREAK: EXHIBITS OPEN & POSTER VIEWING

3:30 PM - 4:30 PM

Plenary

Mental Health Across the Perinatal Period



Cindy-Lee Dennis, PhD, Professor, Nursing and Medicine, Department of Psychiatry; Canada Research Chair, Perinatal Community Health; Women's Health Research Chair, Li Ka Shing Knowledge Institute, St. Michael's Hospital, University of Toronto, Toronto, ON

This session will examine perinatal mental health problems including depression, anxiety and co-morbidity. Prevalence, risk factors, and clinical implications will be explored with a focus on prevention, collaborative care, and migrant women. The importance of preconception health and the role of technology will also be outlined.

Learning Objectives:

- Increase understanding of prevention and treatment strategies to address perinatal mental health problems
- Become aware of current research initiatives to improve the management of perinatal mental health problems

4:45 PM - 7:00 PM

NETWORKING RECEPTION

THE NETWORKING RECEPTION WILL BE HELD IN THE FOYER AT THE SHERATON VANCOUVER AIRPORT

Working Together to Improve Perinatal Outcomes



FRIDAY, MARCH 2

7:00 AM - 8:00 AM
BREAKFAST8:00 - 8:30 AM
OPENING REMARKS & DOOR PRIZES

8:30 AM - 9:30 AM

BC Success Stories Panel

Shaping Practice to Promote Vaginal Birth in BC

Patricia Janssen, RN, PhD, Professor and Lead, Optimal Birth BC, School of Population and Public Health, University of British Columbia, Vancouver, BC**Glen Hamill, Family Practice Physician, Fort St. John Medical Clinic, Fort St. John, BC****Erin O'Sullivan, RN, BScN, MPH, Regional Perinatal Program Development and Evaluation Lead, Island Health Authority, Victoria, BC****Erica Phelps, MD, Department Head, Langley Memorial Hospital, Langley, BC****Jacobus Strydom, MbChB, MFamMed, MCFP, Family Practice Physician, Park Avenue Medical Centre, Northern Health Authority, Terrace, BC****Brenda Wagner, MD, FRCSC, MHSc, Senior Medical Director, Richmond Hospital, Vancouver Health Authority, Richmond, BC**

This session brings together clinical leaders who have demonstrated their ability to increase or maintain high rates of vaginal birth in their organization compared to other hospitals of similar size and acuity. They will share their knowledge of clinical practices and policies that have made this possible and arrive at a common understanding of promising practices that have potential to increase rates of vaginal birth in other BC hospitals.

Learning Objectives:

- Hear from representatives of BC Hospitals that have had the highest vaginal birth rate, what they believe to be their successful practice strategies
- Prioritize these strategies for dissemination throughout BC Health Authorities
- Plan initiatives to incorporate these strategies into clinical pathways, policy change and research objectives



9:30 AM - 10:30 AM

Plenary

Vaginal Seeding and Placentophagy:
Understanding the Controversy**Chelsea Elwood, BMSch, MSc, MD, FRCSC, Clinical Fellow, Reproductive Infectious Disease, Department of Obstetrics & Gynaecology, University of British Columbia, Vancouver, BC**

The idea of the infant microbiome being colonized by the maternal microbiome during birth has recently come to the forefront. However the long term evolution of the infant microbiome and role of mode of delivery on it 'seeding' remains unclear. Placental consumption is a controversial practice with little evidence and described harm. We will review the literature for both of these practices and current recommendations.

Learning Objectives:

- Review the current literature on the role of the vaginal microbiome in predicting the fetal microbiome in pregnancy
- Review the potential harm of the practice of vaginal seeding
- Review the new ACOG recommendations regarding the practice of vaginal seeding
- Review the research, potential risk and benefits of placentophagy

10:30 AM - 11:00 AM

BREAK: EXHIBITS OPEN & POSTER SESSION

11:00 AM - 12:30 PM

C1

C1 | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Healthy & Home: A Program for New Mothers

Tonia N. Olson, MN, IBCLC, Clinical Coordinator, Healthy & Home, West Winds Primary Health Centre, Saskatoon Health Region, Saskatoon, SK**Julie Smith-Fehr, RN, BScN, MN, Maternal Services Manager; Nursing Manager, Healthy & Home, West Winds Primary Health Centre, Saskatoon Health Region, Saskatoon, SK**

We describe a postpartum community nursing support program, Healthy & Home, begun 25 years to bridge the gap between acute hospital care and community including home visitation, clinic care, a Breastfeeding Centre and Café, a Postpartum Anxiety & Depression Support Group and involvement in a Baby-Friendly Coalition.

Learning Objectives:

- Describe an early discharge maternity program
- Assess the evaluation methods and findings
- Discuss recommendations for forming similar programs

C1ii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Smoothing the Transition from Hospital to Home - Innovative Strategies to Prepare for Parenting... Before Baby's Arrival

Christina Cantin, RN, MScN, PNC(C), Perinatal Consultant, Champlain Maternal Newborn Regional Program, Ottawa, ON

The length of postnatal hospital stay continues to decrease across Ontario. This has created a challenge for health care providers to ensure that families have the necessary knowledge to safely care for themselves and their babies, and to ensure that there are no gaps in service in the early postnatal period. The process of co-designing a postnatal planning tool for expectant parents will be described and the results of a pilot study will be discussed.

Learning Objectives:

- Describe a regional initiative intended to capture the current state of postnatal hospital discharge
- Describe the development of a 'Postnatal Planning' tool to enhance transition to parenthood and the importance of collaborating with new and expectant parents in the development of tools for their use
- Discuss the importance of collaboration between hospital and community perinatal care providers and new and expectant parents to optimize transition to home following birth

C1iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Can the "ABC's for New Parents" Book, Developed through an Interprofessional Collaboration, Change the Health Outcomes for Children, Families and Society?

Estelle Paget, BA(Hon), MA LPL (France), Founder, Executive Director, KIDCARECANADA Society, Victoria, BC

Andrew Macnab, MD, FRCPC, Professor, Division of Critical Care, Department of Pediatrics, University of British Columbia, Vancouver, BC

Can the "ABC's for New Parents" book inform about social and emotional development and inspire new parents to apply the practical tips included in the book? What will be the outcome for the child, the family and society if more infants are nurtured from the start of life?

Learning Objectives:

- Use the ABCs book and discuss its relevance to their specific contexts
- Learn and discuss the findings from the pilot studies
- Discuss when this resource would be most valuable to new parents

C2

C2i | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Shifting the Public Health Nursing Care Paradigm in Island Health: The Mother's Story

Erin O'Sullivan, RN, BScN, MPH, Perinatal Program Development and Evaluation Lead, Child, Youth and Family – Public Health, Island Health, Victoria, BC

Liz McKay, RN, BSN, MN, Co-lead, Mother's Story Implementation, Island Health, Victoria, BC

Jan Tatlock, BSN, MCHS Director, Public Health, Island Health, Victoria, BC

The purpose of this presentation is to continue sharing our learning about implementing the Mother's Story Approach; Public Health Nursing practice focused on perinatal women. This year's lecture will focus on implementation structure and support that enables the leadership perseverance required to shift a practice paradigm.

Learning Objectives:

- Provide an implementation status summary as follow up from 2016
- Describe the learning gleaned from implementation and current practice evaluation
- Highlight the significance of the continued partnership with the Nuu Chan Nulth Nursing Program
- Outline evaluation and next steps.

C2ii | 30 MINUTE STANDARD LECTURE | New Research

Walking Together: A Participatory Action Research Approach to Developing Physical Activity Programming for Aboriginal Women in the Downtown Eastside

Jessica Webb, BA, Aboriginal Infant Development Consultant, YWCA Crabtree Corner, Vancouver, BC

Francine Darroch, PhD, Post-doctoral Research Fellow, Critical Research in Health and Healthcare Inequities, School of Nursing, University of British Columbia, Vancouver, BC

Robyn Fabiosa, BA, Aboriginal Infant Development Consultant, YWCA Crabtree Corner, Vancouver, BC

This presentation will focus on the development of a weekly walking program from the perspective of the Aboriginal Infant Development Program at Crabtree; an inclusive walking program was designed to address the specific needs of women on the DTES with a focus on social inclusion.

Learning Objectives:

- Gain insight in the role participatory action research played in the development of an accessible walking program
- Identify barriers faced by women in the DTES when accessing physical activity programming
- Recognize the importance support and social inclusion has in overcoming fears around physical activity

C2iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

MOREOB in BC: Improving Outcomes During Large Scale Change

Facilitator: Sheri DeMeester, Manager, Program Delivery, Salus Global, London, ON

Presenters: TBD

Learn about the impact that the MOREOB Program has had in a remote rural site and within 2 Health Authorities within BC. Stories will be shared of how the MOREOB Program has impacted patient safety and built relationships within sites and across regions. They will also share their experiences in sustaining progress and quality improvement initiatives.

Learning Objectives:

- Understand the impact of front line ownership in system change
- Analyze the elements critical in building engagement in team members
- Discuss key elements in how to sustain a culture of safety and focus on quality improvements

C3

C3i | 45 MINUTE STANDARD LECTURE | New Research

Rolling into Parenthood: Key Physical, Mental Health and Breastfeeding Considerations When Working with Pregnant and New Parents with Physical Disabilities

Karen Hodge, MSW, RCSW, Registered Clinical Social Worker, Adaptability Counselling and Consultation, Vancouver, BC

Melanie Basso, RN, MSN, PNC(C), Senior Practice Leader, Perinatal, BC Women's Hospital and Health Centre, Vancouver, BC

Amanda Lee, MSc Student, Experimental Medicine, Faculty of Medicine, University of British Columbia, Vancouver, BC

Through personal stories, videos and evidence from the literature, Karen, Melanie and Amanda will highlight the unique physical, mental health and breastfeeding considerations for parents with physical disabilities. This includes discussion of helpful screening tools, evidence-based interventions and key community resources to support parents with physical disabilities and their children.

Learning Objectives:

- Cite current evidence to help dispel myths and misconceptions about pregnancy and parenting with a disability
- Identify key needs regarding parent and infant mental health and adaptations to the physical environment across care continuums (prenatal, antepartum, postpartum - home, hospital, community) when supporting parents with physical disabilities and their young children and summarize new research findings related to lactation and women with spinal cord injuries and the clinical implications
- Examine screening tools, evidence based interventions and key community resources to support parents with physical disabilities, their children, and their health care team throughout preconception, pregnancy and early parenthood

C3ii | 45 MINUTE STANDARD LECTURE | New Research

Benefits of Kangaroo Care: Patient and Provider Perspectives

Michelle Peltier, Birth and Postpartum Doula, Monarch Mothering Doula Services, Vancouver, BC

Horacio Osioviich, MD, FRCPC, Division Head, Neonatology, BC Women's Hospital & Health Centre, Vancouver, BC

Kangaroo Care (KC) improves physical and mental health for preterm infants and parents. During 2018, the Provincial Health Services Authority will be working with health care providers, administrators and parents across the province to strengthen KC practice. This session will provide a patient and a provider perspective on the benefits of KC.

Learning Objectives:

- Understand how KC promotes parent and patient-centered care
- Increase knowledge and awareness of the benefits of skin-to-skin and kangaroo care for premature/low-birth weight babies
- Identify strategies to overcome barriers to intermittent and continuous KC in their setting

C4

C4i | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

HerWay Home: Lessons Learned and Promising Practices for Supporting Perinatal Substance Using Women in Community

Amanda Seymour, Coordinator, HerWay Home, Island Health, Victoria, BC

HerWay Home (HWH) offers a multi-service drop-in and outreach program for pregnant women and new mothers affected by substance use. This presentation will share highlights of HerWay Home's outcomes, and will facilitate reflection about emerging practice issues and promising approaches to working with this population.

Learning Objectives:

- Share HerWay Home evaluation highlights
- Facilitate reflection about emerging practice issues
- Identify promising approaches working in community with women who are pregnant/parenting and have substance use issues

C4ii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Mobile Maternity (MoM): A New Kind of Telehealth

Mona Mattei, BA, PgD, CPHIMS-CA, Project Manager, Mobile Maternity, Grand Forks, BC

Jude Kornelsen, PhD, Associate Professor, Department of Family Practice; Co-Director, Centre for Rural Health Research; Director, Applied Policy Research Unit, University of British Columbia, Vancouver, BC

Shiraz Moola, OB/GYN, Maternity Department Head, Kooteany Lake Hospital, Nelson, BC

Mobile Maternity offers real-time obstetrical consults for elective and emergent conditions through secure mobile devices, and support for precipitous deliveries in remote sites. Learn from the team's experiences providing clinical care, managing change in clinical settings, and the importance of sustaining isolated rural practices within the context of other systems.

Learning Objectives:

- Practical details on setting up a mobile telehealth program with scale and spread experiences
- Clinical experience from patient, OB/GYN and primary care provider perspectives
- Research data on results to date

C4iii | 30 MINUTE STANDARD LECTURE | New Research

Evaluating the Impact of Enhancing Prenatal Healthcare Services: The BC Experience with Publicly-funded Non-invasive Prenatal Testing

Sylvie Langlois, MD, FRCPC, FCCMG, Medical Director, BC Prenatal Genetic Screening Program, BC Women's Hospital; Professor of Medical Genetics, Faculty of Medicine, University of British Columbia, Vancouver, BC

Krystal van den Heuvel, Maternal-Fetal Medicine Fellow, BC Women's Hospital, University of British Columbia, Vancouver, BC

Scally Chu, Health Data Analyst, Perinatal Services BC, Vancouver, BC

Non-invasive prenatal testing (NIPT) is a relatively new, non-invasive screening test for common chromosomal abnormalities based on fetal DNA in maternal blood. In October 2015, the BC Ministry of Health approved funding for NIPT for high-risk women as part of the province's Prenatal Genetic Screening Program. This panel will present the Program's work to introduce, monitor, and evaluate the impact of publicly-funded NIPT on rates of prenatal genetic screening and use of invasive diagnostic testing in the province.

Learning Objectives:

- Describe the context of prenatal genetic screening and diagnostic testing in British Columbia
- Explain how the introduction of publicly-funded NIPT has affected use of invasive diagnostic testing such as amniocentesis in British Columbia
- Describe the extent to which the introduction of publicly-funded NIPT has impacted uptake of prenatal genetic screening in rural areas of BC
- Discuss how the outcome monitoring and impact evaluation conducted as part of the NIPT-enhancement to prenatal genetic screening serves as a model for enhancement of other healthcare services

12:30 PM - 1:30 PM

LUNCH: EXHIBITS OPEN & POSTER VIEWING

1:30 - 3:00 PM

D1

D1i | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Whose Agenda and Whose Destiny? Multi-Stakeholder Design of an Online Toolkit to Improve Collaboration in Maternity Care

Saraswathi Vedam, RM FACNM MSN Sci D(hc), Associate Professor, and MSFHR Health Professional Investigator, Midwifery Program, Department of Family Practice, Faculty of Medicine, University of British Columbia, Vancouver, BC

Dialogue and Shared Decisions is an online, flexible course on person-centered maternity care which teaches, through case-based modules, key interprofessional competencies that support effective communication, conflict transformation, and collaborative leadership.

Learning Objectives:

- Demonstrate principles and process of shared decision making across health professionals and with patients to achieve patient/family and community goals
- Enable service users to design and implement their own care plans
- Describe the respective roles of relevant health professions within the broader healthcare system
- Demonstrate communication with other health professionals and patients/clients in a collaborative, respectful, responsive, and responsible manner



D1ii | 30 MINUTE STANDARD LECTURE | New Research

Reduced Prevalence of Small-for-Gestational-Age Birth For Vulnerable Women: A Study of Midwifery versus Physician-Led Care

Daphne McRae, PhD Postdoctoral Fellow, School of Population and Public Health, University of British Columbia, Vancouver, BC

This presentation will highlight results from a BC, population level, retrospective cohort study (n=57,872) examining the association between antenatal midwifery care and odds of small-for-gestational-age or preterm birth, compared to general practitioner or obstetrician-led care for women of low socioeconomic position with low to moderate medical/obstetric risk.

Learning Objectives:

- State the statistical association between antenatal models of care and small-for-gestational-age birth and preterm birth for B.C. women of low socioeconomic position
- Identify maternal behaviours and conditions which modify the associations
- Name three possible mechanisms responsible for improving infant birth outcomes for midwifery patients

D1iii | 30 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Barriers to Addressing Perinatal Mental Health Issues in Midwifery Settings

Hamideh Bayrampour, MSc, PhD, Assistant Professor, Midwifery Program, Department of Family Practice, Faculty of Medicine, University of British Columbia, Vancouver, BC

This presentation starts with a description of practice pattern of various maternity care providers, particularly midwives, around perinatal mental health issues. Then, findings of our recent review on perceived barriers to the screening, referral, and management of perinatal mental health issues in midwifery settings will be presented.

Learning Objectives:

- Recognize the provider-level and system-level barriers to screening, referral and management of perinatal mental health issues
- Identify that the process of screening and management may be overwhelming for some providers
- Distinguish central elements for successful integration of perinatal mental health care into midwifery practice

D2

D2i | 45 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Engaging with the Truth and Reconciliation Commission Call to Action #33: Dialogue on FASD Prevention

Lenora Marcellus, RN, BSN, MN, PhD, Associate Professor, School of Nursing, University of Victoria, Victoria, BC

Nancy Poole, BA, DipCS, MA, PhD, Director, Centre of Excellence for Women's Health; Prevention Lead, CanFASD Research Network, Vancouver, BC

Hanna Scrivens, BA, BSW, MSW, Project Manager, Maternal, Child & Family Health, Regional Teams - Vancouver Island, First Nations Health Authority, Nanaimo, BC

It is important for FASD prevention efforts to be tailored to diverse communities. Participants will be introduced to the Consensus Statement: 8 Tenets for Enacting the TRC Call to Action #33 (developing culturally appropriate FASD programs) and dialogue held on the possibilities of enacting these tenets in your workplace.

Learning Objectives:

- Briefly summarize available evidence on FASD prevention within the context of Aboriginal women and communities
- Describe how the consensus statement was developed
- Describe the eight tenets in the consensus statement for enacting the call to action
- Discuss how these tenets can be enacted within your work place

D2ii | 45 MINUTE STANDARD LECTURE | Best Practice/ Quality Improvement

Support in the Perinatal Period for Women Struggling with Addiction: A Trauma Informed Approach

Jan Ference, BEd, MS, NMT Mentor, IPMHF, Director, Pathways to Healing Partnership, Comox Valley Child Development Association, Courtenay, BC

Alison McLean, Perinatal Trauma Consultant, Pathways to Healing, Comox Valley Child Development Association, Courtenay, BC

Pathways to Healing is currently offering a unique trauma-informed approach to working with addicted women and their babies. Anchored in the latest neuroscience, this program aims to support the attachment relationship between caregivers and their infants. This session will offer an overview of this program; the successes and challenges.

Learning Objectives:

- Recognize the unique characteristics of this trauma-informed approach to working with addicted women in the perinatal period
- Identify the correlation between early childhood trauma or adversity and addiction
- Give an opportunity to reflect on how this kind of model might support their practice

D3

D3i | 30 MINUTE STANDARD LECTURE | New Research

Applying an Adverse Childhood Experience (ACE) Lens to the Postpartum Population

Sara Cave, MPH, Research Analyst, Ontario Ministry of Children and Youth Services, Toronto, ON

Riffaat Mamdani, RN, MN, Program Consultant, Ontario Ministry of Children and Youth Services, Toronto, ON

This presentation will demonstrate the use of an Adverse Childhood Experience (ACE) lens on the data from the Ontario's postpartum home visiting program, Healthy Babies Healthy Children (HBHC). The results indicate an opportunity for both policy and program level explorations.



Learning Objectives:

- Demonstrate the potential of the HBHC Screen to identify, in the newborn population, risk factors that behave like the Adverse Childhood Experiences (ACE)
- Illustrate the potential socio-demographic trends that can support surveillance and system improvements
- Describe the impact of ACE exposures to child development, and discuss the benefits of early intervention

D3ii | 30 MINUTE STANDARD LECTURE | New Research

The BC Healthy Connections Project (BCHCP): A scientific evaluation of Nurse-Family Partnership in Canada

Nicole Catherine, PhD, MSc, Scientific Director and Co-Principal Investigator, BC Healthy Connections Project; Mowafaghian University Research Associate and Adjunct Professor, Faculty of Health Sciences, Simon Fraser University, Vancouver, BC

Donna Jepsen, RN, CCHN(C), BSN, IBCLC, MSc, CCNE, Provincial Coordinator, Nurse Family Partnership, Public Health Services Branch, Population and Public Health Division, Ministry of Health, Victoria, BC

The BC Healthy Connections Project involves a randomized controlled trial investigating the effectiveness of the Nurse-Family Partnership program compared to existing BC services in reducing child maltreatment and improving child and maternal health. Data show that unacceptable pockets of concentrated disadvantage exist in this population of pregnant young women.

Learning Objectives:

- Identify the rigorous scientific methodology of a BC-wide public health intervention involving a randomized controlled trial design
- Recognize the innovative aspects of the BCHCP, in particular how formal policy, academic, provider, and community collaboration was built into this provincial initiative
- Explore how unacceptable pockets of deep socioeconomic disadvantage exist for BC girls and young women who are preparing to parent for the first time

D3iii | 30 MINUTE STANDARD LECTURE | New Research

The Childbirth Fear Questionnaire (CFQ): A New Measure of Fear of Childbirth

Nichole Fairbrother, PhD, RPsych, Island Medical Program, University of Victoria, Victoria, BC

The Childbirth Fear Questionnaire (CFQ) is the most comprehensive measure of fear of childbirth currently available. The CFQ has demonstrated good reliability and validity, and can be used to: screen for fear of childbirth, identify targets for treatment, and track progress in treatment.

Learning Objectives:

- Identify and define the scope of women's childbirth fears
- Compare and contrast the CFQ against other measures of fear of childbirth
- Estimate and appreciate the importance of screening for fear of childbirth using the CFQ

D4

D4i | 30 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Motherwise Fills Gaps for Moms at Risk**Mona Mattei**, BA, PgD, CPHIMS-CA, Project Manager, Kootenay Boundary Division of Family Practice, Grand Forks, BC**Tanya Momtazian**, BSc, BMW, RM, MPH, Clinic Lead, Apple Tree Maternity, Nelson, BC; Vice-President, College of Midwives of British Columbia; Adjunct Professor, Midwifery Program, Department of Family Practice, Faculty of Medicine, University of British Columbia, Vancouver, BC**Sheena Albrecht**, Patient Partner, Kootenay Boundary Division of Family Practice, Grand Forks, BC

Motherwise peer support groups piloted in the Kootenay Boundary region to fill gaps in care for moms experiencing mental health challenges supported over 60 moms in the first year. Explore the experience of moms and providers using this collaborative model, and get the details to spread to your community.

Learning Objectives:

- Tips and tools for collaboratively developing group sessions for moms experiencing depression and anxiety in the perinatal period
- Understanding the details of how the groups functioned
- Impact of facilitated peer support groups for new mom

D4ii | 30 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Childbirth Education: Building Women's Capacity**Farah Jetha**, RN, MN, Perinatal Specialty Nursing, British Columbia Institute of Technology, Burnaby, BC**Amanda Kelloway**, RN, BScN, IBCLC, LCCE, Perinatal Specialty Nursing, British Columbia Institute of Technology, Burnaby, BC

This presentation will focus on the evidence-based impact childbirth education can have on pregnant women and their families and the healthcare team's role in ensuring this vital step is not missed.

Learning Objectives:

- Provide a literature-review on the benefits and positive impacts of formal childbirth education
- Discuss how and where expectant women and their families access childbirth education locally and globally including the role of social determinants of health
- Describe the presenters' knowledge and first-hand experience delivering formal childbirth education along with the current recommendations



D4iii | 30 MINUTE PANEL SESSION | Best Practice/ Quality Improvement

Improving Maternity Patient Preparation: Engaging Providers and Patients**Lana Sullivan**, MA, Project Manager, Population Health Promotion, BC Women's Hospital + Health Centre, Vancouver, BC**Ann Pederson**, PhD, Director, Population Health Promotion, BC Women's Hospital + Health Centre, Vancouver, BC**Renee Fernandez**, BSc, MD, CCFP, Medical Lead, Patient Preparation Project, BC Women's Hospital + Health Centre, Vancouver, BC

This panel session will demonstrate that the process of developing maternity education resources was equally as important as the products. We will discuss health promotion and equity which ground our direction; describe the engagement of interdisciplinary care providers and inclusion of diverse new parents to ensure that patient experience and quality of care throughout their maternity journey is improved.

Learning Objectives:

- Link health promotion with equity and quality improvement
- Illustrate the advantages of care provider consultation
- Review the importance of patient engagement

3:00 PM - 3:30 PM**BREAK: EXHIBITS OPEN & POSTER VIEWING****3:30 PM - 4:30 PM****Plenary****Life Is Simple: So Why Do We Screw It Up?****Louis Hugo Francescutti**, MD, PhD, MPH, FRCPC, FACP, FACPM, CCFP(PC), FRCP(Ire), FRCP(Edin), FRCP(Lon), FRCP(Glasg), ICD-D, CCPE, MSMBC, Emergency Physician, Royal Alexandra Hospital and Northeast Community Health Centre; Professor, Leadership, Advocacy and Public Health, School of Public Health, University of Alberta, Edmonton, AB

Why does life have to be so complicated? Are there some essential elements that increase your chances of having a great life? Any chance we have already discovered them? If so, what are the odds that we have given everyone a fair chance of accessing the most powerful determinants of an individual's health? Come and get a reality check and see how poorly we are doing.

Learning Objectives:

- Understand how simple life is when done properly.
- Explore why most lives are not so simple.
- Learn how to advocate for the changes needed so everyone's life is simple.

4:30 PM - 5:00 PM**CLOSING REMARKS, DOOR PRIZES & EVALUATION**

Developing Quality Improvement Indicators for a Patient

Safety Program in Obstetrics

Cara Bowman, MHS, Evidence Synthesis Epidemiologist, Medical Care Analytics, The Canadian Medical Protective Association, Ottawa, ON

Improving Post-Discharge Surveillance of Surgical Site Infection Following Cesarean Section at BC Women's Hospital

Emma Branch, MSc, Research Analyst, Women's Health Research Institute, Vancouver, BC

Selina Suleman, MPH, Research Assistant, Women's Health Research Institute, Vancouver, BC

Sharing Postnatal Length of Stay Data to Enhance the Transition to Home Following Birth

Christina Cantin, RN, MScN, PNC(C), Perinatal Consultant, Champlain Maternal Newborn Regional Program, Ottawa, ON

Sidestepping the Stigma of PPD/A in a Small Community: Fostering Mothers Wellness Through a Self-care Lens

Cali Chang, RN, Public Health, Island Health, Salt Spring Island, BC

Anne Desrosiers, MN-NP(F), MHSU/Primary-Care Unattached, Island Health, Salt Spring Island, BC

Immunization Before, During and After Pregnancy

Katharine Chilton, RN, BScN, Vaccine Educator, Immunization Program, BC Centre for Disease Control, Vancouver, BC

Stephanie Meier, RN, BScN, Public Health Resource Nurse, Immunization Program, BC Centre for Disease Control, Vancouver, BC

Better Beginnings: At Risk Moms. What Are We Missing?

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Determination of Dietary Phenylalanine Requirements During Early and Late Gestation

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Factors Influencing Screen Time Use in Children Under Two Years of Age

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Breastfeeding Art Expo – Influencing Change



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Karen Graham, BHec, RD, CDE, Coordinator, Breastfeeding Art Expo, Interior Health, Kelowna, BC

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Maternal Decision Making in Regards to Human Milk Donation in BC

Damaris Grunert, BSN, RN, MSN Student, School of Nursing, University of British Columbia; Clinical Nurse Educator, Burnaby Hospital-Perinatal, Fraser Health, Langley, BC

Improving Predictability and Structure in Patient Rounds for Integrated Parent Participation

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Beck's Substantive Theory of Postpartum Depression: A Theoretical Analysis

Megan James, RN, BN, MSN Student, College of Nursing, University of Manitoba, Winnipeg, MB

The Frequency of a Nurturant Response to Infant Elimination Needs: Reducing Unexplained Infant Crying with Elimination Communication

Geraldine Jordan, PhD, Researcher, Environmental Health Lab, Faculty of Humanities and Social Sciences, Trinity Western University, Langley, BC

Understanding Experiences of Social Support as a Coping Resource among Immigrant and Refugee Women with Postpartum Depression: An Integrative Literature Review

Shahin Kassam, MN, BN, RN, Nurse, PhD Nursing Student, Department of Human & Social Development, School of Nursing, University of Victoria, Victoria, BC

Tongue-tie in Infants and Breastfeeding Challenges in Eastern Newfoundland- Can an Assessment Tool for Public Health Nurses Improve Their Confidence in the Referral for Frenotomy

Allison Kavanagh, BA, MSc RS-LP(C), Medical Student, Faculty of Medicine, Memorial University Medical School, St. John's, NL

A Prospective Cohort Study of UBC Family Practice Resident and New Graduate Attitudes toward Intrapartum Care

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Stephanie Stacey, MDCM, CCFP, BSc, MSc, Physician, Department of Family Practice, Faculty of Medicine, University of British Columbia, Vancouver, BC

Bringing Baby Friendly (BCC, 2017) Guidelines to Faith Communities: An Inspiring Journey

Kate McCulloch, RN, BScN, MSN, CCHN(C), Associate Professor, Nursing (BSN) Program, Faculty of Health Sciences, University of the Fraser Valley; Member of the BC Synod ELCIC Faith and Society Committee, Chilliwack, BC

Managing Postnatal Depression: Why We Need an Integrated Approach

Christine Ou, RN, MSN, PhD Student, School of Nursing, University of British Columbia, Vancouver, BC

Wendy Hall, PhD, RN, Professor, Associate Director Graduate Programs, School of Nursing, University of British Columbia, Vancouver, BC

Investigating the Predictors of Recovery from Depression and Anxiety in Women: A Longitudinal Study from Childbirth to Six Years

Radhika Shankar, MSc, MD Candidate, Student, Faculty of Medicine, University of British Columbia, Vancouver, BC

'The Blue Arc of the Rainbow'- Aboriginal Women in the Perinatal Period and eHealth Literacy: A Convergent Parallel Mixed Methods Study

Judy Sturm, RN, MN, MSc, Aboriginal Lead, Interior Health Authority, Kamloops, BC

Mothers' Perspectives on Their Technology Use While Breastfeeding in British Columbia

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